



Unemployment Insurance Appeal Board

PO Box 15126
Albany, NY 12212-5126
TEL: (833) 910-4382
FAX: (518) 402-6208
www.uiab.ny.gov

Certification of Services Provided and Itemized Bill Supporting Fee Request by Attorney or Registered Representative

Administrative Law Judge/Appeal Board Case No(s): _____; _____; _____

Hearing Date(s): ____/____/____; ____/____/____; ____/____/____

Total Amount of Fee Requested: \$ _____

Name of Attorney/Representative: _____

Address: _____

Tel: (_____) _____ - _____ Fax: (_____) _____ - _____

Claimant Name: _____ Tel: (_____) _____ - _____

Address: _____

Certification of Services Provided

I, _____, hereby certify under the penalty of perjury that I represented (Claimant Name), _____, at a, (circle one) hearing / appeal / both, before the Unemployment Insurance Appeal Board in the matter(s) indicated above and that the itemized bill accompanying this certification is an accurate description of the work performed for which I am seeking payment. My client has been awarded benefits by the Administrative Law Judge or Appeal Board Decision dated: ____/____/____. I hereby submit the following itemized bill for services and a copy of the signed retainer agreement in this case. I request that the Unemployment Insurance Appeal Board approve the fees contained therein. I further certify that a copy of this certification, itemized bill and retainer agreement have been sent this date to the claimant by first class mail postage paid.

(Print) Attorney/Registered Representative Date (Signature) Attorney/Registered Representative Date

Itemized Bill for Services Provided

Please provide a detailed report of actual services provided to the claimant in this case for which you are seeking payment, including time spent and any associated expenses. Please specify whether the services and expenses relate to client consultation, the time spent in the hearing or in preparing for the hearing, travel expenses, legal research or document preparation or witness preparation. You may also describe any other factors that you believe relevant to the amount of the fee requested. **Do not forget to send a copy of your Retainer Agreement and a copy of this Certification to the claimant.**