

# FSIU Post-Designation Legal Fees General Licence Reporting

## 2024/09GL Part B

### Section 1 – Basic Information

#### 1a Law Firm(s) / Counsel(s) [add boxes as required]

Name:
Address:
Email:
Telephone:
Head of Compliance:
Regulator:

Name:
Address:
Email:
Telephone:
Head of Compliance:
Regulator:

#### 1b Designated Person(s) (DP) Represented

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**1c Group ID of DP Represented**

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**1d Case Description**

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**Section 2 - Fees****2a Fees Incurred**

Total Fees Incurred (in \$):
Total Hours:
Date range:

**2b Fee Rate**

Name	Role	Normal Fee Rate	Fee Rate Requested

**2c Workstream Overview**

Workstream Name	Brief Description	Total Fees

*Add table for proceedings in multiple jurisdictions*

**2e Brief fees or refresher fees**

Total Incurred (in \$):

Date range:

**2f Expenses Incurred**

Total Expenses Incurred (in \$):

Date Range:

**2g Engagement Letter**

*Provide copy of unredacted engagement letter*

**2e Payment route including date received**

**Section 3 – Confirmation**

**3a Please confirm the information provided in this form is accurate**

Name:
Date:
Role:
Signature.....

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