

STANISLAUS COUNTY SUPERIOR COURT

 In the Matter of: _____)
 _____)
 _____)
 _____)
 _____)

Case No.: _____
**DECLARATION AND ORDER FOR
 ATTORNEY FEES/RECAPITULATION
 "FAMILY/PROBATE FEE CLAIM"**

The undersigned attorney, who is duly licensed to practice law in California, declares that on _____ the Honorable _____ presiding, appointed the undersigned under:
 Family Code §7861/2 Family Code §3150 or Probate Code §1470 to represent _____ minor(s) parent, and on _____, the final disposition of the case was made before the Honorable _____ presiding. The undersigned states that he has performed the legal services and incurred the expenses listed in this Declaration as follows, and which were reasonable and necessary.

Date	Description of Activity or Time Sheet No.	Time in 1/10
1.		
2.		
3.		

Total _____ X \$ _____ = _____

I have received payment of \$ _____ on this case.

(List additional information to this order on reverse side or as attachments.)

I declare under penalty of perjury that the foregoing, including any attachments, is true and correct.
 Executed on _____, at Modesto, California.

Print Name: _____ Telephone No.: _____

 Declarant's Signature _____ Address _____

ORDER

Pursuant to the above declaration and the information provided therein, attorneys fees and costs are hereby awarded to the declarant in the sum of \$ _____. The Court is hereby directed to make said payment to the above declarant.

Dated: _____

 Judge of the Superior Court/Superior Court Administrator

SAP CODING STRIP For 3150 CODE

_____ SAP DOCUMENT NUMBER	110001 FUND	50 PLANT
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VENDOR NUMBER: _____	INV NO: _____
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	COST CENTER	G/L DESCRIPTION	G/L ACCOUNT	AMOUNT
Line 1	502550	Children	938801	
Line 2	502550	Parents/Guardian	938802	
Line 3	502550	CAC Sec 3150	938803	

_____ Approved for Payment