STANISLAUS COUNTY SUPERIOR COURT

In the Matter of:)))	Case No.: DECLARATION AND ORDER FOR ATTORNEY FEES/RECAPITULATION " FAMILY/PROBATE FEE CLAIM "			
The undersigned attorney, wh the Honor Family Code §7861/2 Gamma Family Code §7861/2	able	presiding, a	ppointed the undersig	ned under:	
				e case was	
made before the Honorable		presiding. The under	signed states that he h	has performed	
the legal services and incurre and necessary.	d the expenses listed	in this Declaration as	follows, and which we	ere reasonable	
Date	Description of A	Activity or Time Sheet No.	Time in 1	/10	
1.					
2.					
3.					
Total		X \$ <u>125</u>			
□ I have received payment of	= on t	this case.			
		s order on reverse side			
I declare under penalty of per Executed on			hments, is true and co	rrect.	
Print Name:		Telephone No.:	Telephone No.:		
Declarant's Signature			Address		
		ORDER	11001055		
Pursuant to the above declara awarded to the declarant in the above declarant.	tion and the information	tion provided therein, a			
Dated:					
Dated	Judge of the Super	Judge of the Superior Court/Court Administrator			
	Superior Cour	t Coding Strip - FC 31	50		
CC	/FA/FUND	G/L DESCRIPTION	G/L ACCOUNT		
502	220/1231/110001	CAC FC 3150	938803		
Vendor No	Invoice No		SAP Document No		

Court Approval for Payment (FC 3150)