Attachment 3c to FL-158 – Supporting Declaration for Attorney’s Fees and Costs

Declaration of Financial Need for Attorney’s Fees and Costs

Name: Angela [Last Name]

Case No.: [Insert if known]

County: [Insert Superior Court County]

Related Matter: Enforcement of existing child support order

1. Income and Financial Status

Monthly Gross Income: $2,300 (part-time receptionist)

Monthly Net Income: Approx. $2,000

Other Support Received: None — respondent (father) is not current on support order

Monthly Expenses:

Rent: $1,250

Utilities: $150

Groceries: $450

Childcare: $300

Transportation: $150

Other essentials: $100

Total Expenses: $2,400

Net Income: -$400/month

2. Respondent’s Financial Status (to the best of my knowledge)

Employer: [e.g., Union electrician, ABC Corporation]

Reported Annual Income: approx. $120,000

Known Assets: Owns home, new vehicle

Support Payment History: Not current on court-ordered support

3. Legal Representation Quote

Attorney consulted: [Name], [Firm Name]

Consultation Date: June 12, 2025

Quoted Retainer: $2,500

Hourly Rate: $350

Estimated Cost for Enforcement Motion: $3,000–$4,000

4. Request

I respectfully request that the court award reasonable attorney’s fees pursuant to Family Code §2030 and §3557, due to:  
- A significant disparity in income and access to counsel,  
- My inability to pay for legal representation without hardship, and  
- The respondent’s apparent ability to cover legal costs for both parties.

Signed: Angela [Last Name]

Dated: [Insert date]