
Name

Address

City, State, Zip

Phone

Email

Check your email. You will receive information and documents at this email address.

I am Plaintiff/Petitioner's Attorney Defendant/Respondent's Attorney (Utah Bar #: _____)

Plaintiff/Petitioner's Licensed Paralegal Practitioner

Defendant/Respondent's Licensed Paralegal Practitioner (Utah Bar #: _____)

In the District Justice Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>_____ Plaintiff/Petitioner</p> <p>v.</p> <p>_____ Defendant/Respondent</p>	<p>Declaration in Support of Motion for Legal Fees (Utah Rule of Civil Procedure 73)</p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner (domestic cases)</p>
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1. I am the attorney or licensed paralegal practitioner for the (choose one):

plaintiff or petitioner

defendant or respondent

other: _____

2. I was hired to represent the above party on _____ (date).

3. My billing rate is \$ _____ (amount) per hour.

4. I have been licensed as a legal professional since _____ (date).
5. I have spent time on the following aspects of the case (Include time records and descriptions of work performed. Attach additional sheets if needed.):

Amount of time spent on task	Description of task

(Attach additional sheets if needed.)

6. I am entitled to legal fees totaling \$_____ (amount).
7. This amount is reasonable because (explain):

Attorney or Licensed Paralegal Practitioner of record

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

 Date

Signature ► _____

Printed Name _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Declaration in Support of Motion for Legal Fees on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

_____ Signature ► _____
 Date _____
 Printed Name _____