

1 Person who asked the court to waive court fees:

Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_

Write your name and address in #1.  
Fill out #2 if you have a lawyer.

2 Lawyer (Name, Address, Telephone Number, e-mail, and State Bar number):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3 A request to waive court fees was filed on (date):

The court made a previous fee waiver order in this case on (date):

Read this form carefully. All checked boxes  are court orders.

Notice: The court may order you to answer questions about your finances and later order you to pay back the waived fees. If this happens and you do not pay, the court can make you pay the fees and also charge you collection fees. If there is a change in your financial circumstances during this case that increases your ability to pay fees and costs, you must notify the trial court. The court may order the other side to pay the fees. If you are ordered to pay the fees, the amount of the waiver may be reduced. The court may order the other side to pay the fees on the settlement in the

Do not fill out anything else on this page.

4 After reviewing the court makes the following order:

- The court grants your request and waives your additional superior court fees and costs that are checked below. (Cal. Rules of Court, rule 3.56.) You do not have to pay for the checked items.
• Filing
• Making
• Sheriff
• Reporter
• Preparing

(2) Additional Fee Waiver. The court grants your request and waives your additional superior court fees and costs that are checked below. (Cal. Rules of Court, rule 3.56.) You do not have to pay for the checked items.

- Jury fees and expenses
 Fees for a peace officer to testify in court
 Fees for court-appointed experts
 Court-appointed interpreter fees for a witness
 Reporter's daily fees (beyond the 60-day period following the fee waiver order)
 Other (specify):

(3) Fee Waiver for Appeal. The court grants your request and waives the fees and costs checked below, for your appeal. (Cal. Rules of Court, rules 3.55, 3.56, 8.26, and 8.818.) You do not have to pay for the checked items.

- Preparing and certifying clerk's transcript for appeal
 Other (specify):

SAMPLE ONLY
Do not fill out this form

Fill in court name and street address:

Superior Court of California, County of

Fill in case number and case name:

Case Number: Write your Case Number here

Case Name: Write your Case Name here

Give Additional Court Fees

isted below. (Cal. Rules of

rtificates
other court department
rpreter in small claims court
rt-approved daily rate)
hearings

Your name: \_\_\_\_\_

**Write your Name here**

**Case Number:** \_\_\_\_\_

**Write your Case Number here**

b.  The court **denies** your request, as follows:

**Warning!** If you miss the deadline below, the court cannot process your request for hearing or the court papers you filed with your original request. If the papers were a notice of appeal, the appeal may be dismissed.

(1)  The court **denies** your request because it is incomplete. You have **10 days** after the clerk gives notice of this order (see date below) to:

- Pay your fees and costs, or
- File a \_\_\_\_\_ (see **items**):

(2)  The court is not eligible for \_\_\_\_\_

The court \_\_\_\_\_ (Superior Court), form FW-006.

- Pay your \_\_\_\_\_
- Ask for \_\_\_\_\_

c.  The court needs more information below. The hearing date is \_\_\_\_\_

Bring the \_\_\_\_\_

**Do not fill out anything else on this page.**

**Hearing Date** →

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Name and address of court if different from page 1: \_\_\_\_\_  
Dept.: \_\_\_\_\_ Rm.: \_\_\_\_\_

**Warning!** If item c is checked, and you do not go to court on your hearing date, the judge will deny your request to waive court fees, and you will have 10 days to pay your fees. If you miss that deadline, the court cannot process the court papers you filed with your request. If the papers were a notice of appeal, the appeal may be dismissed.

Date: \_\_\_\_\_

Signature of (check one):  Judicial Officer  Clerk, Deputy



**Request for Accommodations.** Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation*, Form MC-410. (Civil Code, § 54.8.)

**Clerk's Certificate of Service**

I certify that I am not involved in this case and (check one):  A certificate of mailing is attached.

I handed a copy of this order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.

This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from (city): \_\_\_\_\_, California on the date below.

Date: \_\_\_\_\_

Clerk, by \_\_\_\_\_, Deputy