

① Name of person who asked the court to waive court fees:

Street or mailing address: \_\_\_\_\_

City: \_\_\_\_\_

**Write your name and address in #1.**

② Name \_\_\_\_\_ *phone number*

*e-mail*

**Fill out #2 if you have a lawyer.**

**SAMPLE ONLY**

**Do not fill out  
this form**

*Fill in court name and street address:*

Superior Court of California, County of \_\_\_\_\_

③ The court made a previous fee waiver order in this case on *(date)*: \_\_\_\_\_

④ The court sent you a notice to go to court about your fee waiver on *(date)*: \_\_\_\_\_

*Fill in case number and case name:*

Case Number **Write your Case Number here**

Case Name: \_\_\_\_\_

**Write your Case Name here**

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

⑤ There was a hearing on *(date)*: \_\_\_\_\_  
at *(time)*: \_\_\_\_\_ in *(Department)*: \_\_\_\_\_

The following people were at the hearing *(check all that apply)*:

Person in ①       Lawyer in ②

Others *(names)*: \_\_\_\_\_

⑥ After considering the court's findings:

a.  **No Change** remains in effect.

b.  **Fee Waiver** longer eligible.

(1) You must pay \_\_\_\_\_

(2)  You must pay \_\_\_\_\_

(a)  You must pay \_\_\_\_\_

(b)  You must pay \_\_\_\_\_

c.  **Fee Waiver** case because: \_\_\_\_\_

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

(1) You must pay all court fees in this case from the date of this order.

(2)  You must also pay the court \$ \_\_\_\_\_ for fees that the court initially waived.

(a)  You must pay that amount within 10 days of this order.

(b)  You may pay that amount in monthly payments of \$ \_\_\_\_\_ beginning *(date)*: \_\_\_\_\_ and payable on the 1st of each month after that until paid in full.

Write your **Name** here

Case Number:

Write your **Case Number** here

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

6 d.  **Fee Waiver Is Modified.** The court finds that you obtained the initial fee waiver in bad faith, for an improper purpose, or to needlessly increase the costs of litigation. The court places the following limitations on the fee waiver that was granted to you:

- (1)  You must pay all court fees in this case from the date of this order.
- (2)  From the date of this order, only the following court fees will be waived (*court to check all that apply*).

**You must pay for all court fees that are not checked below:**

- Filing papers at superior court     Making certified copies     Giving notice and certificates
- Sheriffs' fees
- Court reporter fees
- Reproduction of documents (for the fee waiver) *days*
- Jury fees
- Court reporter fees
- Other

(3)  Other modification

e.  Other Order

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

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



\_\_\_\_\_  
*Signature of Judge or Judicial Officer*

**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