INFORMATION SHEET ON WAIVER OF APPELLATE COURT FEES— SUPREME COURT, COURT OF APPEAL, APPELLATE DIVISION

If you file an appeal, a petition for a writ, or a petition for review in a civil case, such as a family law case or a case in which you sued someone or someone sued you, you must generally pay a filing fee to the court. If you are a party other than the party who filed the appeal or the petition, you must also generally pay a fee when you file your first document in a case in the Court of Appeal or Supreme Court. You and the other parties in the case may also have to pay other court fees in these proceedings, such as fees to prepare or get a copy of a clerk's transcript in an appeal. However, if you cannot afford to pay these court fees and costs, you may ask the court to issue an order saying you do not have to pay these fees (this is called "waiving" these fees).

- 1. Who can get their court fees waived? The court will waive your court fees and costs if:
- You are getting public assistance, such as Medi-Cal; Food Stamps; Supplemental Security Income (not Social Security); State Supplemental Payment; County Relief/General Assistance; In-Home Supportive Services; CalWORKS; Tribal Temporary Assistance for Needy Families; Cash Assistance Program for Aged, Blind, and Disabled; Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program); or unemployment compensation.
- You have a low income level. Under the law you are considered a low-income person if the gross monthly income (before deductions for taxes) of your household is less than the amount listed below:

| Family Size | Family Income | Family Size | Family Income | Family Size | Family Income | If more than 6 people at |
|-------------|---------------|-------------|---------------|-------------|---------------|--------------------------|
| 1 | \$2,430.00 | 3 | \$4,143.34 | 5 | \$5,856.67 | home, add \$856.67 for |
| 2 | \$3,286.67 | 4 | \$5,000.00 | 6 | \$6,713.34 | each extra person. |

• You do not have enough income to pay for your household's basic needs and your court fees.

2. What fees and costs will the court waive? If you qualify for a fee waiver, the Supreme Court, Court of Appeal, or Appellate Division will waive the filing fee for the notice of appeal, a petition for a writ, a petition for review, or the first document filed by a party other than the party who filed the appeal or petition, and any court fee for participating in oral argument by telephone. The trial court will also waive costs related to the clerk's transcript on appeal, the fee for the court to hold in trust the deposit for a reporter's transcript on appeal under rule 8.130(b) or rule 8.834(b) of the California Rules of Court, and the fees for making a transcript or copy of an official electronic recording under rule 8.835. If you are the appellant (the person who is appealing the trial court decision), the fees waived include the deposit required under Government Code section 68926.1 and the costs for preparing and certifying the clerk's transcript and sending the original to the reviewing court and one copy to you. If you are the respondent (a party other than the appellant in a case that is being appealed), the fees waived include the costs for sending you a copy of the clerk's transcript. You can also ask the trial court to waive other necessary court fees and costs.

The court **cannot** waive the fees for preparing a reporter's transcript in a civil case. A special fund, called the Transcript Reimbursement Fund, may help pay for the transcript. (See <u>www.courtreportersboard.ca.gov/ consumers/index.shtml#trf</u> and Business and Professions Code sections 8030.2 and following for more information about this fund.) If you are unable to pay the cost of a reporter's transcript, a record of the oral proceedings can be prepared in other ways, by preparing an agreed statement or, in some circumstances, a statement on appeal or settled statement.

3. How do I ask the court to waive my fees?

• Appeal in Limited Civil Case (civil case in which the amount of money claimed is \$25,000 or less). In a limited civil case, if the trial court already issued an order waiving your court fees *and that fee waiver has not ended* (fee waivers automatically end 60 days after the judgment), the fees and costs identified in item 2 above are already waived; just give the court a copy of your current fee waiver. If you do not already have an order waiving your fees or you had a fee waiver but it has ended, you must complete and file a *Request to Waive Court Fees* (form FW-001). If you are the appellant (the party who is appealing), you should check both boxes in item 4 on FW-001 and file the completed form with your notice of appeal. If you are the respondent (a party other than the appellant in a case that is being appealed), the completed form should be filed in the court when the fees you are requesting to be waived, such as the fee for the clerk's transcript or telephonic oral argument, are due.

Judicial Council of California, www.courts.ca.gov Rev. April 1, 2023 INFORMATION SHEET ON WAIVER OF APPELLATE COURT FEES_____ APP-015/FW-015-INFO SUPREME COURT, COURT OF APPEAL, APPELLATE DIVISION Page 1 of 2

- Writ Proceeding in Limited Civil Case (civil case in which the amount of money claimed is \$25,000 or less). If you want the Superior Court to waive the fees in a writ proceeding in a limited civil case, you must complete a *Request to Waive Court Fees* (form FW-001). In item 4 on FW-001, check the second box. The completed form should be filed with your petition for a writ.
- If You Are a Guardian or Conservator. If you are a guardian or conservator or a petitioner for the appointment of a guardian or conservator, special rules apply to your request for a fee waiver on an appeal from an order in the guardianship or conservatorship proceeding or in a civil action in which you are a party acting on behalf of your ward or conservatee. Complete and submit a *Request to Waive Court Fees (Ward or Conservatee)* (form FW-001-GC) to request a fee waiver. See California Rules of Court, rule 7.5.
- Appeal in Other Civil Cases. If you want the court to waive fees and costs in an appeal in a civil case other than a limited civil case, such as a family law case or an unlimited civil case (a civil case in which the amount of money claimed is more than \$25,000), you must complete a *Request to Waive Court Fees* (form FW-001). In item 4 on FW-001, check the second box to ask the Court of Appeal to waive the fee for filing the notice of appeal or, if you are a respondent (a party other than the one who filed the appeal), the fee for the first document you file in the Court of Appeal. Check both boxes if you also want the trial court to waive your costs for the clerk's transcript (if the trial court already issued an order waiving your fees *and that fee waiver has not ended*, you do not need to check the first box; the fees and costs identified in item 2 above are already waived, just give the court a copy of your current fee waiver). If you are the appellant, the completed form should be submitted with your notice of appeal (if you check both boxes in item 4, the court may ask for two signed copies of this form). If you are the respondent, the completed form should be submitted at the time the fee you are asking the court to waive is due. For example, file the form in the trial court with your request for a copy of the clerk's transcript if you are asking the court to waive the transcript fee or file the form in the Court of Appeal with the first document you file in that court if you are asking the court to waive the fee for filing that document. To request waiver of a court fee for telephonic oral argument is due.
- Writ Proceeding in Other Civil Cases. If you want the Supreme Court or Court of Appeal to waive the fees and costs in a writ proceeding in a civil case other than a limited civil case, such as a family law case or an unlimited civil case (a civil case in which the amount of money claimed is more than \$25,000), you must complete a *Request to Waive Court Fees* (form FW-001). If you are the petitioner (the party filing the petition), the completed form should be submitted with your petition for a writ in the Supreme Court or Court of Appeal clerk's office. If you are a party other than the petitioner, the completed form should be filed with the first document you file in the Supreme Court or Court of Appeal.
- **Petition for Review.** If you want to request that the Supreme Court waive the fees in a petition for review proceeding, you must complete a *Request to Waive Court Fees* (form FW-001) or a *Request to Waive Court Fees (Ward or Conservatee)* (form FW-001-GC). If you are the petitioner, you should submit the completed form with your petition for review. If you are a party other than the petitioner, the completed form should be filed with the first document you file in the Supreme Court.

IMPORTANT INFORMATION!

- Fill out your request completely and truthfully. When you sign your request for a fee waiver, you are declaring under penalty of perjury that the information you have provided is true and correct.
- The court may ask you for information and evidence. You may be ordered to go to court to answer questions about your ability to pay court fees and costs and to provide proof of eligibility. Any initial fee waiver you are granted may be ended if you do not go to court when asked. You may be ordered to repay amounts that were waived if the court finds you were not eligible for the fee waiver.
- If you receive a fee waiver, you must tell the court if there is a change in your finances. You must tell the court immediately if your finances improve or if you become able to pay court fees or costs during this case (file form FW-010 with the court). You may be ordered to repay any amounts that were waived after your eligibility ended. If the trial court waived your fees and costs and you settle your case for \$10,000 or more, the trial court will have a lien on the settlement in the amount of the waived fees.
- The fee waiver ends. The fee waiver expires 60 days after the judgment, dismissal, or other final disposition of the case or when the court finds that you are not eligible for a fee waiver.

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INFORMATION SHEET ON WAIVER OF APPELLATE COURT FEES _____ APP-015/FW-015-INFO SUPREME COURT, COURT OF APPEAL, APPELLATE DIVISION Page 2 of 2

Print this form Save this form

| FW-001 Request t | o Waive C | ourt Fees | | CONF | IDENTIAL |
|--|--|-------------------|-----------------------|-----------------------|-------------------------|
| | | | | Clerk stamps date h | ere when form is filed. |
| If you are getting public benefits, are a low-income person, or do not have | | | | | |
| | enough income to pay for your household's basic needs and your court fees, you | | | | |
| may use this form to ask the court to wa | • | | • | | |
| you to answer questions about your finat | nces. If the cou | rt waives the fe | ees, you | | |
| may still have to pay later if: | | | | | |
| • You cannot give the court proof of | | | | ill in court name and | |
| Your financial situation improves d You settle your civil case for \$10,0 | | | twoiwog | Superior Court o | f California, County of |
| your fees will have a lien on any su | | | | | |
| waived fees and costs. The court m | | | | | |
| | | | | | |
| 1 Your Information (person asking | | | | | |
| Name: | | | [| | |
| Street or mailing address: City: | Ctata | 7: | F | ill in case number a | nd name: |
| | State | e: Zip: | | Case Number: | |
| Phone: | | | | | |
| 2 Your Job, if you have one <i>(job till</i>) | tle): | | | Case Name: | |
| Name of employer: | | | | case name: | |
| Employer's address: | | | | | |
| 3 Your Lawyer, if you have one (<i>n</i> | ame, firm or a <u>j</u> | filiation, addre | ess, phone nu | mber, and State | Bar number): |
| | | | | | |
| a. The lawyer has agreed to advar | nce all or a port | ion of your fee | s or costs <i>(cl</i> | neck one): Yes | □ No □ |
| b. <i>(If yes, your lawyer must sign h</i> | - | - | (| | |
| | | | on your low | income vou ma | v have to go to a |
| | If your lawyer is not providing legal-aid type services based on your low income, you may have to go to a hearing to explain why you are asking the court to waive the fees. | | | | |
| (4) What court's fees or costs are | • | | P | | |
| Superior Court (See Inform | ation Sheet on | Waiver of Supe | erior Court F | ees and Costs (1 | form FW-001-INFO).) |
| Supreme Court, Court of A | | | | | |
| of Appellate Court Fees (fo | | | - | | |
| (5) Why are you asking the court | | | | | |
| a. I receive (check all that app | - | | |): | |
| \square Food Stamps \square Supp. Set | | | | | ssist. 🗍 IHSS |
| \Box CalWORKS or Tribal TAN | | | | nemployment | |
| b. \Box My gross monthly househo | | | | · · | ount listed below (If |
| you check 5b, you must fill | · · · · · | | | | ount fisicu ociow. (1) |
| Family Size Family Income | | Family Income | Family Size | Family Income | If more than 6 people |
| 1 \$2,430.00 | 3 | \$4,143.34 | 5 | \$5,856.67 | at home, add \$856.67 |
| 2 \$3,286.67 | 4 | \$5,000.00 | 6 | \$6,713.34 | for each extra person. |
| c. \Box I do not have enough incom | | . , | - | , , | |
| (check one and you <u>must</u> fil | | | | | , i usk nie obuit to. |
| \square waive all court fees and | x o <i>i</i> | aive some of th | ne court fees | 🗌 let me ma | ke payments over time |
| (6) \square Check here if you asked the co | | | | | |
| (If your previous request is red | isonably availa | ible, please atta | ach it to this | form and check | here): |
| I declare under penalty of perjury und | • | - | • | | · — |
| on this form and all attachments is tru | | | | | • |
| Date: | | L | | | |
| Print your name have | | | | | |

Print your name here

Request to Waive Court Fees

Sign here

If you checked 5a on page 1, do not fill out below. If you checked 5b, fill out guestions 7, 8, and 9 only. If you checked 5c, you **must** fill out this entire page. If you need more space, attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top.

| Check here if your income changes a lot from month to month. If it does, complete the form based on your average income for the past 12 months. |
|---|
| |
| |

Your Gross Monthly Income

a. List the source and amount of *any* income you get each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

| (1) | |
|-----|----|
| (2) | \$ |
| (3) | \$ |
| (4) | \$ |
| | ¢ |

b. Your total monthly income:

Household Income 9

a. List the income of all other persons living in your home who depend in whole or in part on you for support, or on whom you depend in whole or in part for support.

| Name | Age | Relationship | Gross Monthly Income |
|------|-----|--------------|-------------------------|
| (1) | | | \$ |
| (2) | | | \$ |
| (3) | | | \$ |
| (4) | | | \$ |
| | - | - | |

\$

b. Total monthly income of persons above: \$

Total monthly income and

household income (8b plus 9b):

To list any other facts you want the court to know, such as unusual medical expenses, etc., attach form MC-025 or attach a sheet of paper and write Financial Information and your name and case number at the top.

Check here if you attach another page.

Important! If your financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010.

10 Your Money and Property

- 0---

| a. | Cash | | Ф | _ |
|----|---------------------------------|------------------------|---------------------------------------|---|
| b. | All financial accounts (List ba | nk name and | d amount): | |
| | (1) | | \$ | _ |
| | (2) | | \$ | _ |
| | (3) | | \$ | _ |
| c. | Cars, boats, and other vehic | | | |
| | Make / Year (1) | Fair M Value \$ | arket How Much You Still Owe \$ | J |
| | (2) | ¥ \$ | ∜ \$ | - |
| | (3) | \$ | \$ | _ |
| d. | Real estate Address (1) | Fair Ma Value \$ | arket How Much You Still Owe \$ | u |
| | (1)(2) | \$ | \$\$ | - |

ሰ

e. Other personal property (jewelry, furniture, furs,

| stocks, bonds, etc.): | Fair Market | How Much You |
|-----------------------|-------------|--------------|
| Describe | Value | Still Owe |
| (1) | \$ | _\$ |
| (2) | \$ | _\$ |

(11) Your Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

| a. List any payroll deductions and the monthly an | |
|---|-----------|
| | β |
| (2) | \$ |
| (3) 9 | \$ |
| | β |
| b. Rent or house payment & maintenance | \$ |
| Food and household supplies | \$ |
| Utilities and telephone | \$ |
| e. Clothing | \$ |
| f. Laundry and cleaning | \$ |
| Medical and dental expenses | \$ |
| h. Insurance (life, health, accident, etc.) | \$ |
| i. School, child care | \$ |
| j. Child, spousal support (another marriage) | \$ |
| k. Transportation, gas, auto repair and insurance | |
| Installment payments (list each below): Paid to: | |
| (1) | \$ |
| (2) | \$ |
| (3) | \$ |
| m. Wages/earnings withheld by court order | \$ |
| n. Any other monthly expenses (list each below). | |
| Paid to: | How Much? |
| (1) | \$ |
| (2) | \$ |
| (3) | \$ |

Total monthly expenses (add 11a –11n above): \$_

Save this form

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Request to Waive Court Fees

Print this form

FW-001, Page 2 of 2

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Clear this form

| | FW-002 Request to Waive Additional Court Fees (Superior Court) | CONFIDENTIAL |
|----------------|--|--|
| a cur reduc | form asks the court to waive <i>additional</i> court fees that are not covered in rent order. If you have not already received an order that waived or ced your court fees, you must complete and file a <i>Request to Waive Court</i> <i>(Superior Court),</i> form FW-001, along with this form. Your Information <i>(person asking the court to waive the fees):</i> | Clerk stamps date here when form is filed. |
| \bigcirc | Name: | Fill in court name and street address: |
| | Street or mailing address: | Superior Court of California, County of |
| | City: State: Zip: | |
| | Phone number: | |
| 2 | Your lawyer, if you have one (name, firm or affiliation, address, phone number, and State Bar number): | |
| | | Fill in case number and name: |
| | | Case Number: |
| | a. The lawyer has agreed to advance all or a portion of your fees or costs <i>(check one)</i> : | Case Name: |
| | b. <i>(If yes, your lawyer must sign here):</i> Lawyer's signature: | _ |
| | If your lawyer is not providing legal-aid type services based on your lov hearing to explain why you are asking the court to waive the fees. | v income, you may have to go to a |
| (3) | Date your <i>last</i> court fee waiver order, if any, was granted: | |
| 4 | Has your financial situation improved since your last <i>Request to Waive Cou</i> (<i>If yes, you must fill out a new</i> Request to Waive Court Fees, <i>form FW-001</i> , | |
| 5 | What other fees do you want your court fee waiver order to cover? (Check a | all that apply): |
| Ċ | a. 🔲 Jury fees and expenses | |
| | b. Court-appointed interpreter fees for a witness | |
| | c. \Box Fees for a peace officer to testify in court | |
| | d. Fees for court-appointed experts | |
| | e. Other (specify): | |
| 6 | Why do you need these other services? (Explain): | |
| \bigcirc | | |

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 within five days. (Use form FW-010.) If you win your case, the trial court may order the other side to pay the fees. If you settle your civil case for **\$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date:

Print your name here

Sign here

| | Order on Court Fee Waiv Superior Court) | Clerk stamps date here when form is filed. |
|--|--|--|
| Person who asked Name: | the court to waive court fees: | |
| Street or mailing addr | ress: | |
| City: | State:Zip: | |
| | in (1) has one (name, firm name, a l , and State Bar number): | ıddress, |
| | | Fill in court name and street address: Superior Court of California, County of |
| | | |
| \frown A request to waive co | urt fees was filed on (date): | Fill in case number and name: |
| | previous fee waiver order in this cas | se on (date): |
| Read this form carefully. | . All checked boxes ☑ are court o | Case Name: |
| fees. If this happens and yo | bu do not pay, the court can make you al circumstances during this case that | ur finances and later order you to pay back the waived u pay the fees and also charge you collection fees. If there t increases your ability to pay fees and costs, you must ou win your case, the trial court may order the other side |
| notify the trial court within to pay the fees. If you settle | | e, the trial court will have a lien on the settlement in the |
| notify the trial court within to pay the fees. If you settle | e your civil case for \$10,000 or more The trial court may not dismiss the or <i>Request to Waive Court F</i> | e, the trial court will have a lien on the settlement in the case until the lien is paid. |
| notify the trial court within to pay the fees. If you settle amount of the waived fees. After reviewing your: the court makes the fees. | e your civil case for \$10,000 or more The trial court may not dismiss the or <i>Request to Waive Court F</i> | e, the trial court will have a lien on the settlement in the case until the lien is paid. |

- Reporter's fee for attendance at hearing or trial, if the court is not electronically recording the proceeding and you request that the court provide an official reporter
- Assessment for court investigations under Probate Code section 1513, 1826, or 1851
- Preparing, certifying, copying, and sending the clerk's transcript on appeal
- Holding in trust the deposit for a reporter's transcript on appeal under rule 8.130 or 8.834
- Making a transcript or copy of an official electronic recording under rule 8.835
- (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 court-appointed experts
 Other (specify): _____

| b. 🗌 The o | court denies your fee waiver request because: |
|------------|--|
| | rning! If you miss the deadline below, the court cannot process your request for hearing or the court papers filed with your original request. If the papers were a notice of appeal, the appeal may be dismissed. |
| | Your request is incomplete. You have 10 days after the clerk gives notice of this Order (see date of service on next page) to: |
| | • Pay your fees and costs, or |
| | File a new revised request that includes the incomplete items listed: Below On Attachment 4b(1) |
| | |
| | The information you provided on the request shows that you are not eligible for the fee waiver you requested for the reasons stated: \Box Below \Box On Attachment 4b(2) |
| | |
| | |
| | The court has enclosed a blank <i>Request for Hearing About Court Fee Waiver Order (Superior Court)</i> (form FW-006). You have 10 days after the clerk gives notice of this order (see date of service below) to: Pay your fees and costs in full or the amount listed in c below, or Ask for a hearing in order to show the court more information. (Use form FW-006 to request hearing.) |
| c. (1) | The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about the questions regarding your eligibility that are stated: \square Below \square On Attachment 4c(1) |
| | |
| | |
| (2) | Bring the items of proof to support your request, if reasonably available, that are listed: Below On Attachment 4c(2) |
| | |
| | |
| | |
| | |

This is a Court Order.

Name and address of court if different from above:

| Hearing | → Date: _ | Time: | |
|---------|-----------|-------|--|
| Date | Dept.: | Room: | |

Warning! If item c(1) 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 five days before the hearing. Contact the clerk's office for *Request for Accommodations by Persons With Disabilities and Response* (form MC-410). (Civ. Code, § 54.8.)

Clerk's Certificate of Service

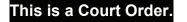
I certify that I am not involved in this case and (check one):

- \Box 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.

A certificate of mailing is attached.

Date:

| Clerk, by | , Deputy |
|-----------|----------|
| Name: | |



| / Person wh | o asked the court to waive court fees: | |
|-------------------------------------|--|---|
| | o asked the court to warve court rees. | |
| | ess: | |
| | State: Zip: | |
| | iber: | |
| | person in 1 has one: (<i>Name, address, phone number, e-mail,</i> Bar number): | Fill in court name and street address: |
| | | |
|) On (<i>date</i>): - FW-001). | you filed a <i>Request to Waive Court Fees</i> (form | Court of Appeal or Supreme Court Case Number: |
|) The court r | eviewed your request and makes the following order: | |
| b. The | Other (<i>specify</i>): | |
| | Pay your fees and costs, or File a new revised request that includes the items listed below (| |
| (2) | • Pay your fees and costs, or | (specify incomplete items): ot eligible for the fee waiver you |
| (2) | Pay your fees and costs, or File a new revised request that includes the items listed below (| (specify incomplete items): ot eligible for the fee waiver you |
| | Pay your fees and costs, or File a new revised request that includes the items listed below (The information you provided on the request shows that you are nerequested (<i>specify reasons</i>): You have 10 days from the date this notice was sent to: Pay your fees and costs, or | (specify incomplete items): ot eligible for the fee waiver you |
| | Pay your fees and costs, or File a new revised request that includes the items listed below (The information you provided on the request shows that you are marequested (<i>specify reasons</i>): You have 10 days from the date this notice was sent to: Pay your fees and costs, or File more information that shows you are eligible. The court finds there is substantial question regarding your eligibility): You have 10 days from the date this notice was sent to: | (specify incomplete items): ot eligible for the fee waiver you |
| | Pay your fees and costs, or File a new revised request that includes the items listed below (The information you provided on the request shows that you are nerequested (<i>specify reasons</i>): You have 10 days from the date this notice was sent to: Pay your fees and costs, or File more information that shows you are eligible. The court finds there is substantial question regarding your eligibility): | (specify incomplete items): ot eligible for the fee waiver you lity (describe issue regarding |
| | Pay your fees and costs, or File a new revised request that includes the items listed below (The information you provided on the request shows that you are nerequested (<i>specify reasons</i>): You have 10 days from the date this notice was sent to: Pay your fees and costs, or File more information that shows you are eligible. The court finds there is substantial question regarding your eligibility): You have 10 days from the date this notice was sent to: Pay your fees and costs, or | (specify incomplete items): ot eligible for the fee waiver you lity (describe issue regarding |

| | Hearing Date | > Date: | Time: | Dept.: |
|--------|-------------------|-------------------|------------------------|--|
| | | Name and ad | dress of the court if | different from page 1: |
| | | | | |
| 🗌 Brin | g the following p | roof to support y | your request, if it is | reasonably available: |
| - | | | | |
| | | | | |
| | | | | our hearing date, the court will deny your |

Date: _____

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

| FW-010 | Notice to Court of Imp Financial Situation or | oroved Settlement | CONFIDENTIAL |
|---|--|--|---|
| Name: Street or mailing City: Phone number: Your lawyer, if | on (person with a fee waiver): address: State: you have one (name, address, phot nber: | Zip: | Clerk stamps date here when form is filed. |
| | | | Fill out court name and street address: Superior Court of California, County of |
| <u> </u> | court fee waiver order in this case: | | |
| | | | Fill out case number and case name: |
| | | | Case Number: |
| | | | Case Name: |
| fees. If this happens ar there is a change in yo must notify the trial co side to pay the fees. If | nd you do not pay, the court can ma ur financial circumstances during t purt within five days. (Use form FW | ke you pay the fees ar his case that increases 7-010.) If you win you 00 or more, the trial co | ater order you to pay back the waived nd also charge you collection fees. If your ability to pay fees and costs, you in case, the trial court may order the other ourt will have a lien on the settlement in e lien is paid. |
| | tuation has changed since the date over a state of the date over the date of t | | aiver order in a way that improves my |
| | fee waiver because my financial sit | | and I am able to pay my court fees and |
| | my updated financial information in for a fee waiver. (<i>Complete form F</i> | | to Waive Court Fees. I believe I am still his form.) |
| a. I (check one | tled for (<i>check one</i>) \square less than $\$$) \square have \square have not receiven and address of the party who has age | ved the proceeds of the | |
| | | | |

I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

Date:

Print your name here

Sign here