



Samples

Request to Waive Court Fees

FW-001 Request to Waive Court Fees

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 household may use this form to ask the court to waive your court fees. The court may still have to pay later if:

- You cannot give the court proof of your eligibility,
- Your financial situation improves during this case, or
- You settle your civil case for **\$10,000** or more. The trial court's fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge you any collection costs.

1. Enter your name and contact info.

2. Enter info about your job, if you are currently employed.

3. Enter your lawyer's info, if you have one. If not, enter "In Pro Per".

4. Check the box for the court where your case will be heard.

5. You must select either A, B, or C, depending on what fits your situation.

6. Date, print your name, and sign the form

7. Enter the address for the court handling your case:

For Civil Cases:
Superior Court, County of Sacramento
720 Ninth Street
Sacramento, CA 95814

For Family or Probate Cases:
Superior Court, County of Sacramento
3341 Power Inn Road
Sacramento, CA 95826

Enter your case number, if you do not have one, leave blank.

The case name is usually the party names, such as "Jones v. Smith".

If you check box 5(a), make sure to check the box for each type of assistance you are currently receiving

1 Your Information (person asking the court to waive the fees):
Name: Paul Sample
Street or mailing address: 1234 Main Street
City: Sacramento State: CA Zip: 95817
Phone: 999-555-1234

2 Your Job, if you have one (job title): Mechanic
Name of employer: Joe's Auto Shop
Employer's address: 4321 Any Street, Sacramento, CA

3 Your Lawyer, if you have one (name, firm or affiliation, address, phone number):
In Pro-Per

4 What court's fees or costs are you asking to be waived?
 Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO))
 Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO))

5 Why are you asking the court to waive your court fees?
a. I receive (check all that apply; see form FW-001-INFO for definitions):
 Food Stamps Supp. Sec. Inc. SSP Medi-Cal County Relief/Gen. Assist. IHSS
 CalWORKS or Tribal TANF CAPI WIC Unemployment
b. My gross monthly household income (before deductions for taxes) is less than the amount you check 5b, you must fill out 7, 8, and 9 on page 2 of this form.)

Family Size	Family Income	Family Size	Family Income	Family Size	Family Income
1	\$2,265.00	3	\$3,838.34	5	\$5,411.67
2	\$3,051.67	4	\$4,625.00	6	\$6,198.34

c. I do not have enough income to pay for my household's basic needs and the court fees (check one and you **must** fill out page 2):
 waive all court fees and costs waive some of the court fees let me make payments over time

6 Check here if you asked the court to waive your court fees in this case in the last six months. (If your previous request is read on this form and all attachments is true and correct, you do not need to check here):

I declare under penalty of perjury and under penalty of contempt of court that the information I have provided on this form and all attachments is true and correct.

Date: 08/01/2022
Paul Sample
Print your name here

Sign here

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5. You must select either A, B, or C, depending on what fits your situation.
A. If you check box A, you do NOT complete page 2.
B. If you check box B, complete the left side of page 2.
C. If you check box C, complete all of page 2.



**If you checked 5a, do not fill out page 2.
If you checked box 5b fill out 7, 8, 9 ONLY.
If you checked 5c fill out the entire page.**

If your income changes a lot check this box, if it stays about the same, leave blank. **7** 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.

Enter your name. Case Number:

Enter the cash you have available, all accounts you have, with current balances, all vehicles and real property, including market value and amount owed.

8 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) Wages \$2,850.00
(2) \$
(3) \$
(4) \$
b. Your total monthly income: \$2,850.00

9 Household Income
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) Sam Sample 17 Son \$800.00
(2) Brenda Sample 12 Daughter \$0.00
(3) \$
(4) \$
b. Total monthly income of persons above: \$800.00
Total monthly income and household income (8b plus 9b): \$3,650.00

10 Your Money and Property
a. Cash \$20.00
b. All financial accounts (List bank name and amount):
(1) Bank of Sacramento \$100.00
(2) \$
(3) \$
c. Cars, boats, and other vehicles
Make / Year Fair Market Value How Much Still Owed
(1) 2000 Honda \$2,000.00 \$0.00
(2) 2012 Toyota \$8,500.00 \$5,200.00
(3) \$ \$
d. Real estate
Address Fair Market Value How Much Still Owed
(1) 1234 Main Street, Sacto Ca \$250,000.00 \$24,000.00
(2) \$ \$
e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.)
Describe Fair Market Value How Much Still Owed
(1) NONE \$ \$
(2) \$ \$

11 Your Monthly Deductions and Expenses
a. List any payroll deductions and the monthly amount.
(1) Federal State Tax \$329.50
(2) Medical, Dental, Vision Insurance \$214.35
(3) FICA/CASDI \$108.10
(4) \$
b. Rent or house payment & maintenance \$1,450.00
c. Food and household supplies \$50.00
d. Utilities and telephone \$354.00
e. Clothing \$20.00
f. Laundry and cleaning \$22.00
g. Medical and dental expenses \$15.00
h. Insurance (life, health, accident, etc.) \$50.00
i. School, child care \$0.00
Child, spousal support (another marriage) \$0.00
Transportation, gas, auto repair and insurance \$450.00
Installment payments (list each below):
Paid to:
(1) Auto Loan \$215.00
(2) Generic Credit Card \$100.00
(3) \$
Wages/earnings withheld by court order \$
n. Any other monthly expenses (list each below)
Paid to: How Much Still Owed
(1) \$ \$

Total up your monthly expenses. Total monthly expenses (add 11a-11n above): \$3,827.95

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

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Order on Court Fee Waiver

Enter your name and contact info

FW-003 Order on Court Fee Waiver (Superior Court)

Enter the address for the court handling your case:
For Civil Cases:
Superior Court, County of Sacramento
720 Ninth Street
Sacramento, CA 95814

For Family or Probate Cases:
Superior Court, County of Sacramento
3341 Power Inn Road
Sacramento, CA 95826

1 Person who asked the court to waive court fees:
 Name: Paul Sample
 Street or mailing address: 1234 Main Street
 City: Sacramento State: CA Zip: 95814

2 Lawyer, if person in 1 has one (name, address, phone number, e-mail, and State Bar number): In Pro Per

3 A request to waive court fees was filed on (date): 04/01/2019
 The court made a previous fee waiver order in this case on (date):

Are court orders.

Enter your lawyer's info, if you have one. If not, enter "In Pro Per".

Enter your case number. If you do not have one, leave blank.

Case Number:

Case Name:
Sample v. ABC Company

Enter the date you will be filing the request, of you are not sure, leave blank. If the court previously granted a fee waiver in this case, enter the date it was granted.

Notice: The court may order you to answer questions about your finances and later order you to pay fees. If this happens and you do not pay, the court can make you pay the fees and also charge you a fee 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 you to pay the fees. If you settle your civil case for \$10,000 or more, the trial court will have a lien on the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

The case name is usually the party names, such as "Jones v. Smith".

4 After reviewing your: Request to Waive Court Fees Request to Waive Additional Court Fees

the court may:

a. The court will complete the rest of the form, and return it to you by mail.

(1) If you are requesting a fee waiver, you must pay the costs listed below. (Cal. Rules of Court, rule 8.835) For the following:

- Filing papers in Superior Court
- Making copies and certifying copies
- Sheriff's fee to give notice
- Court fee for phone hearing
- Reporter's fee for attendance at hearing or trial, if reporter provided by the court
- 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
- Giving notice and certificates
- Sending papers to another court department
- Court-appointed interpreter in small claims court

(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

Other (specify): _____

DO NOT FILL ANYTHING ELSE ON THIS FORM.
The court will complete the rest of the form, and return it to you by mail.

Judicial Council of California, www.courts.ca.gov
Revised July 1, 2015. Mandatory Form
Government Code, § 68634(e)
Cal. Rules of Court, rule 3.52

Order on Court Fee Waiver (Superior Court)

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