

# **Fee Waiver Packet**

## **(Guardianship and Conservatorship)**

What you will find in this packet:

- **Information Sheet on Waiver of Court Fees and Costs (FW-001-INFO)**
- **Request to Waive Court Fees (Ward or Conservatee) (FW-001-GC)**
- **Request to Waive Additional Court Fees (Ward or Conservatee) (FW-002-GC)**
- **Order on Court Fee Waiver (Ward or Conservatee) (FW-003-GC)**
- **Notice to Court of Improved Financial Situation or Settlement (Ward or Conservatee) (FW-010-GC)**
- **Application and Order for Deferral of Court Investigation Assessment (GC-06)**

## INFORMATION SHEET ON WAIVER OF SUPERIOR COURT FEES AND COSTS

If you have been sued or if you wish to sue someone, if you are filing or have received a family law petition, or if you are asking the court to appoint a guardian for a minor or a conservator for an adult or are an appointed guardian or conservator, and if you (or your ward or conservatee) cannot afford to pay court fees and costs, you may not have to pay them in order to go to court. If you (or your ward or conservatee) are getting public benefits, are a low-income person, or do not have enough income to pay for your (or his or her) household's basic needs *and* your court fees, you may ask the court to waive all or part of those fees.

1. To make a request to the court to waive your fees in superior court, complete the *Request to Waive Court Fees* (form FW-001) or, if you are petitioning for the appointment of a guardian or conservator or are an appointed guardian or conservator, complete the *Request to Waive Court Fees (Ward or Conservatee)* (form FW-001-GC). If you qualify, the court will waive all or part of its fees for the following:
  - Filing papers in superior court (other than for an appeal in a case with a value of over \$25,000)
  - Making and certifying copies
  - Sheriff's fee to give notice
  - Court fee for telephone hearing
  - Reporter's fee for attendance at hearing or trial, if a reporter is 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 8.833 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
  - Having a court-appointed interpreter in small claims court
2. You may ask the court to waive other court fees during your case in superior court as well. To do that, complete a *Request to Waive Additional Court Fees (Superior Court)* (form FW-002) or *Request to Waive Additional Court Fees (Superior Court) (Ward or Conservatee)* (form FW-002-GC). The court will consider waiving fees for items such as the following, or other court services you need for your case:
  - Jury fees and expenses
  - Fees for court-appointed experts
  - Other necessary court fees
  - Fees for a peace officer to testify in court
  - Court-appointed interpreter fees for a witness
3. If you want the Appellate Division of Superior Court or the Court of Appeal to review an order or judgment against you and you want the court fees waived, ask for and follow the instructions on *Information Sheet on Waiver of Appellate Court Fees, Supreme Court, Court of Appeal, Appellate Division* (form APP-015/FW-015-INFO).

### IMPORTANT INFORMATION!

- **You are signing your request under penalty of perjury. Answer truthfully, accurately, and completely.**
- **The court may ask you for information and evidence.** You may be ordered to go to court to answer questions about your ability, or the ability of your ward or conservatee, to pay court fees and costs and to provide proof of eligibility. Any initial fee waiver you or your ward or conservatee are granted may be ended if you do not go to court when asked. You or your ward's or conservatee's estate may be ordered to repay amounts that were waived if the court finds you were not eligible for the fee waiver.
- **Public benefits programs listed on the application form.** In item 5 on the *Request to Waive Court Fees (item 8 of the Request to Waive Court Fees (Ward or Conservatee))*, there is a list of programs from which you (or your ward or conservatee) may be receiving benefits, listed by the abbreviations they are commonly known by. The full names of those programs can be found in Government Code section 68632(a), and are also listed here:
  - Medi-Cal
  - Food Stamps—California Food Assistance Program, CalFresh Program, or SNAP
  - Supp. Sec. Inc.—Supplemental Security Income (not Social Security)
  - SSP—State Supplemental Payment
  - County Relief/General Assistance—County Relief, General Relief (GR) or General Assistance (GA)
  - IHSS—In-Home Supportive Services
  - CalWORKS—California Work Opportunity and Responsibility to Kids Act
  - Tribal TANF—Tribal Temporary Assistance for Needy Families
  - CAPI—Cash Assistance Program for Aged, Blind, or Disabled Legal Immigrants

- **If you receive a fee waiver, you must tell the court if there is a change in your finances, or the finances of your ward or conservatee.** You must tell the **court** within five days if those finances improve or if you, or your ward or conservatee, become able to pay court fees or costs during this case. (File *Notice to Court of Improved Financial Situation or Settlement* (form FW-010) or *Notice to Court of Improved Financial Situation or Settlement (Ward or Conservatee)* (form FW-010-GC) with the court.) You may be ordered to repay any amounts that were waived after your eligibility, or the eligibility of your ward or conservatee, came to an end.
- **If you receive a judgment or support order in a family law matter:** You may be ordered to pay all or part of your waived fees and costs if the court finds your circumstances have changed so that you can afford to pay. You will have the opportunity to ask the court for a hearing if the court makes such a decision.
- **If you win your case in the trial court:** In most circumstances the other side will be ordered to pay your waived fees and costs to the court. The court will not enter a satisfaction of judgment until the court is paid. (This does not apply in unlawful detainer cases. Special rules apply in family law cases and in guardianships and conservatorships. (Government Code, section 68637(d), (e), and Cal. Rules of Court, rule 7.5.)
- **If you settle your civil case for \$10,000 or more:** Any trial court waived fees and costs must first be paid to the court out of the settlement. **The court will have a lien on the settlement in the amount of the waived fees and costs.** The court may refuse to dismiss the case until the lien is satisfied. A request to dismiss the case (use form CIV-110) must have a declaration under penalty of perjury that the waived fees and costs have been paid. Special rules apply to family law cases.
- **The court can collect fees and costs due to the court.** If waived fees and costs are ordered paid to the trial court, or if you fail to make the payments over time, the court can start collection proceedings and add a \$25 fee plus any additional costs of collection to the other fees and costs owed to the court.
- **The fee waiver ends.** The fee waiver expires 60 days after the judgment, dismissal, or other final disposition of the case or earlier if a court finds that you or your ward or conservatee are not eligible for a fee waiver. If the case is a guardianship or conservatorship proceeding, see California Rules of Court, rule 7.5(k) for information on the final disposition of that matter.
- **If you are in jail or state prison:** Prisoners may be required to pay the full cost of the filing fee in the trial court but may be allowed to do so over time. See Government Code section 68635.

*Clerk stamps date here when form is filed.*

**This form must be used by a guardian or conservator, or by a petitioner for the appointment of a guardian or conservator, to request a waiver of court fees in the guardianship or conservatorship court proceeding or in any other civil action in which the guardian or conservator represents the interests of the ward or conservatee as a plaintiff or defendant.**

If the ward or conservatee (including a proposed ward or conservatee if a petition for appointment of a guardian or conservator has been filed but has not yet been decided by the court) directly receives public benefits or is supported by public benefits received by another for his or her support, is a low-income person, or does not have enough income to pay for his or her household's basic needs and the court fees, you may use this form to ask the court to waive the court fees. The court may order you to answer questions about the finances of the ward or conservatee. If the court waives the fees, the ward or conservatee, his or her estate, or someone with a duty to support the ward or conservatee, may still have to pay later if:

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

*Fill in court name and street address:*

**Superior Court of California, County of**

*Fill in case number and name:*

**Case Number:**

**Case Name:**

**1 Your Information** (*guardian or conservator, or person asking the court to appoint a guardian or conservator*):

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

**2 Your Lawyer** (*if you have one*): Name: \_\_\_\_\_

Firm or Affiliation: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

a. The lawyer has agreed to advance all or a portion of court fees or costs (*check one*): Yes  No

b. (*If yes, your lawyer must sign here.*) Lawyer's signature: \_\_\_\_\_

*If your lawyer is not providing legal-aid type services based on your or the ward's or conservatee's low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.*

**3 Ward's or Conservatee's Information** (*file a separate Request for each ward in a multi-ward case*):

Name: \_\_\_\_\_ Age and date of birth (*ward only*): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

**4 Ward's or Conservatee's Lawyer**, if any: Name: \_\_\_\_\_

Firm or Affiliation: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

**5 Ward or Conservatee's Job** (*job title; if not employed, so state*): \_\_\_\_\_

Name of employer: \_\_\_\_\_

Employer's address: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_



Name of (Proposed) Ward or Conservatee: \_\_\_\_\_

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

**6 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).)

**7**  Check here if you asked the court to waive court fees for this case in the last six months.  
(If your previous request is reasonably available, please attach it to this form and check here):

**8 Why are you asking the court to waive the ward's or conservatee's court fees?**

- a.  The ward or one or both of the ward's parents, or the conservatee or the conservatee's spouse or registered domestic partner, receive (check all that apply):
- Supplemental Security Income (SSI)  State Supplemental Payment (SSP)  SNAP (Food Stamps)
  - IHSS (In-Home Supportive Services)  CalWORKS or Tribal TANF  Medi-Cal
  - County Relief/General Assistance  CAPI (Cash Assistance Program for Aged, Blind, and Disabled)
- (Names and relationships to ward or conservatee of persons who receive the public benefits listed above):

b.  The gross monthly income of the ward's or conservatee's household (before deductions for taxes) is not more than the amount listed below. (If you check 8b, you **must** fill out items 14, 15, and 16 on page 4 of this form.)\*

Family Size	Family Income	Family Size	Family Income	Family Size	Family Income	If more than 6 people at home, add \$433.34 for each extra person.
1	\$1,237.50	3	\$2,100.00	5	\$2,962.50	
2	\$1,668.75	4	\$2,531.25	6	\$3,393.75	

- c.  The ward's or conservatee's household does not have enough income to pay for its basic needs and the court fees. I ask the court to (check one, and you **must** fill out items 14, 15, 16, 17, and 18 on page 4):\*
- (i)  Waive all court fees and costs.
  - (ii)  Waive some court fees and costs.
  - (iii)  Let the (proposed) guardian or conservator, on behalf of the (proposed) ward or conservatee, make payments over time.

\*(Do not include income of guardian or conservator living in the household in 8b. or 8c. or count him or her in family size in 8b. unless he or she is a parent of the ward or the spouse or registered domestic partner of the conservatee.)

**Guardians or petitioners for their appointment must complete items 9 and 10.**

**9 Ward's Estate:**  Person only, no estate.  Inventory or petition estimated value:

Source (e.g., gift, inheritance, settlement, judgment, insurance): \_\_\_\_\_ Est. collection date: \_\_\_\_\_

**10 Ward's Parents' Information:**

a. Name of ward's father: \_\_\_\_\_  Deceased (date of death): \_\_\_\_\_  
Street or mailing address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Phone number: \_\_\_\_\_

b. Name of ward's mother: \_\_\_\_\_  Deceased (date of death): \_\_\_\_\_  
Street or mailing address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Phone number: \_\_\_\_\_

c. Ward's parents are (check all that apply):  married  living together  separated  divorced  
Support order for ward?  No  Yes Payable to (name): \_\_\_\_\_  
Payor (name): \_\_\_\_\_  
Court: \_\_\_\_\_ Case Number: \_\_\_\_\_  
Date of order (if multiple, date of latest): \_\_\_\_\_ Monthly amount: \_\_\_\_\_



Name of (Proposed) Ward or Conservatee: \_\_\_\_\_

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

**Conservators or petitioners for their appointment must complete items 11–13.**

**11 Conservatee’s Estate:**  Person only, no estate.

Inventory or petition estimated value: \_\_\_\_\_ Est. collection date: \_\_\_\_\_

**12 Conservatee’s Spouse’s or Registered Domestic Partner’s Information:**

Name of conservatee’s spouse or registered domestic partner: \_\_\_\_\_  Spouse  Partner

Date of marriage or partnership: \_\_\_\_\_  Deceased (*date of death*): \_\_\_\_\_

Street or mailing address: \_\_\_\_\_ Phone number: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of employer (*if none, so state*): \_\_\_\_\_

Employer’s address: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

The conservatee’s spouse or partner  is  is not managing or, following appointment of a conservator is planning to manage, some or all of the couple’s community property outside the conservatorship estate.

If you selected “is” above: The income, money, and property shown on page 4  includes  does not include the income and property managed, or expected to be managed, by the spouse/partner outside the estate.

Divorced (*date of final judgment or decree*): \_\_\_\_\_

Court: \_\_\_\_\_

Case Number: \_\_\_\_\_ Support order for conservatee?  No  Yes

Date of support order (*if multiple, date of latest*): \_\_\_\_\_ Monthly amount: \_\_\_\_\_

**13 The Conservatee and Trusts:**

The conservatee:

a.  Is  Is not a trustor or settlor of a trust.

b.  Is  Is not a beneficiary of a trust.

If you selected “Is” to complete any of the above statements, identify and provide, in an attachment to this *Request*, the current address and telephone number of the current trustee(s) of each trust, describe the general terms of and value of each trust and the nature and value of the conservatee’s interest in each trust, and the amount(s) and frequency of any distributions to or for the benefit of the conservatee prior to your appointment as conservator of which you are aware. (*You may use Judicial Council form MC-025 for this purpose.*)

**All applicants who checked item 8b or item 8c on page 2 must continue to and follow the instructions for completion of items 14–16 or items 14-18 at the top of page 4, before signing below.**

**The information I have provided on this form and all attachments about the (proposed) ward or conservatee is true and correct to the best of my information and belief. The information I have provided on this form and all attachments concerning myself is true and correct. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

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

\_\_\_\_\_  
*Print your name here*

▶ \_\_\_\_\_  
*Sign here*



Name of (Proposed) Ward or Conservatee:

Case Number:

If you checked 8a on page 2, do not fill out below. If you checked 8b, you must answer questions 14-16. If you checked 8c, you must answer questions 14-18. If you need more space, attach form MC-025 or attach a sheet of paper, and write "Financial Information" and the ward's or conservatee's name and case number at the top.

14 Check here if the ward's or conservatee's income changes a lot from month to month. If it does, complete the form based on his or her average income for the past 12 months.

15 Ward's or Conservatee's Gross Monthly Income

a. List the source and amount of any income the ward or conservatee gets 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) \$
(5) \$

b. Total monthly income: \$

16 Ward's or Conservatee's Household's Income

a. List the income of all other persons living in the ward's or conservatee's home who depend in whole or in part on him or her for support, or on whom he or she depends in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Rows 1-10.

b. Total monthly income of persons above: \$

Total monthly income and household income (15b plus 16b): \$

To list any other facts you want the court to know, such as the (proposed) ward's or conservatee's unusual medical expenses, etc, attach form MC-025 or attach a sheet of paper and write "Financial Information" and the (proposed) ward's or conservatee's name and case number at the top. Check here if you attach another page. Important! If the ward's or conservatee's financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010-GC.

Do not include income of guardian or conservator living in the household in item 16, his or her money and property in item 17, or his or her deductions and expenses in item 18 unless he or she is a parent of the ward or the spouse or registered domestic partner of the conservatee.

17 Ward's or Conservatee's Household's Money and Property

a. Cash \$

b. All financial accounts (list bank name and amount):

- (1) \$
(2) \$
(3) \$

c. Cars, boats, and other vehicles

Table with columns: Make / Year, Fair Market Value, How Much You Still Owe. Rows 1-3.

d. Real estate

Table with columns: Address, Fair Market Value, How Much You Still Owe. Rows 1-2.

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.):

Table with columns: Describe, Fair Market Value, How Much You Still Owe. Rows 1-2.

18 Ward's or Conservatee's Household's Monthly Deductions and Expenses

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

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

b. Rent or house payment and maintenance \$

c. Food and household supplies \$

d. Utilities and telephone \$

e. Clothing \$

f. Laundry and cleaning \$

g. 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 \$

l. Installment payments (list each below):

Table with columns: Paid to, How Much? Rows 1-3.

m. Wages/earnings withheld by court order \$

n. Any other monthly expenses (list each below): \$

Table with columns: Paid to, How Much? Rows 1-3.

Total monthly expenses (add 18a-18n above): \$

**Request to Waive Additional Court Fees (Superior Court) (Ward or Conservatee)****CONFIDENTIAL**

Clerk stamps date here when form is filed.

This form must be used by a guardian or conservator, or a petitioner for the appointment of a guardian or conservator, in the guardianship or conservatorship proceeding or in any other civil action in which the guardian or conservator represents the interest of the ward or conservatee as a plaintiff or defendant, to ask the court to waive *additional* court fees that are not covered in a current order. If you have not already received an order that waived or reduced your court fees, you must complete and file a *Request to Waive Court Fees (Ward or Conservatee)*, form FW-001-GC, along with this form.

Fill in court name and street address:

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

Fill in case number and name:

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

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

**1 Your Information** (guardian or conservator, or person asking the court to appoint a guardian or conservator):

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

**2 Your Lawyer** (if you have one): Name: \_\_\_\_\_

Firm or Affiliation: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

a. The lawyer has agreed to advance all or a portion of your fees or costs (check one):  Yes  No  
(If yes, your lawyer must sign here.) Lawyer's signature: \_\_\_\_\_

b. If your lawyer is not providing legal-aid type services based on the ward's or conservatee's low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

**3 Ward's or Conservatee's Information** (file a separate Request for each ward in a multi-ward case):

Name: \_\_\_\_\_ Age and date of birth (ward only): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_

**4 Ward's or Conservatee's Lawyer, if any:** Name: \_\_\_\_\_

Firm or Affiliation: \_\_\_\_\_ State Bar No.: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_

**5** Date ward's or conservatee's last court fee waiver order, if any, was granted: \_\_\_\_\_**6** Has the ward's or conservatee's financial situation improved since your last *Request to Waive Court Fees*? No  Yes

(If yes, you must fill out a new Request to Waive Court Fees, form FW-001-GC, and attach it to this form.)





Name of (Proposed) Ward or Conservatee: \_\_\_\_\_

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

7 What other fees do you want the court fee waiver order to cover? (*Check all that apply*):

- a.  Jury fees and expenses
- b.  Court-appointed interpreter fees for a witness
- c.  Fees for a peace officer to testify in court
- d.  Fees for court-appointed experts
- e.  Other (*specify*):

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

8 Why does the ward or conservatee need these other services? (*Explain*):

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

**Notice:** The court may order you to answer questions about the finances of the ward or conservatee and later order you, as guardian or conservator of his or her estate, to pay back waived fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If the fees are not paid back, the court may also charge collection fees.

If there is a change in the financial circumstances of the ward or conservatee during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010-GC for this purpose.)

If this case is a civil action against another person on behalf of the ward or conservatee and you win it, the trial court may order the other side to pay the fees. If you settle the case against another person for **\$10,000** or more payable to the ward's or conservatee's estate, 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.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

**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*

Clerk stamps date here when form is filed.

**1 (Proposed) guardian or conservator who asked the court to waive court fees for (proposed) ward or conservatee:**

Name: \_\_\_\_\_  
Street or mailing address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**2 Lawyer, if person in 1 has one:**

Name: \_\_\_\_\_ State Bar No: \_\_\_\_\_  
Firm or Affiliation: \_\_\_\_\_  
Street or mailing address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

**3 (Proposed) ward or conservatee:**

Name: \_\_\_\_\_  
Street or mailing address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

**4 Lawyer for (proposed) ward or conservatee, if any:**

Name: \_\_\_\_\_ State Bar No: \_\_\_\_\_  
Firm or Affiliation: \_\_\_\_\_  
Street or mailing address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

**5 A request to waive court fees was filed on (date): \_\_\_\_\_**

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

Fill in court name and street address:

**Superior Court of California, County of**

Fill in case number and name:

**Case Number:**

**Case Name:**

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

**Notice:** The court may order you to answer questions about the ward's or conservatee's finances after granting a waiver and may later order payment of the waived fees from his or her estate. If this happens and the fees are not paid, the court can also charge collection fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If there is a change in the ward's or conservatee's financial circumstances during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010-GC.)

If this case is an action against another party and you win the case on behalf of the ward or conservatee, the trial court may order the other side to pay some or all of the waived fees. If you settle the matter 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.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

**6 After reviewing your:**  Request to Waive Court Fees  Request to Waive Additional Court Fees

**the court makes the following orders:**

a.  The court **grants** your request concerning the ward's or conservatee's court fees and costs, as follows:

(1)  **Fee Waiver.** The court grants your request and waives the fees and costs listed below.

(Cal. Rules of Court, rules 3.55 and 8.818.) You do not have to pay the court fees for the following:

- Filing papers in Superior Court
  - Giving notice and certificates
  - Making copies and certifying copies
  - Sending papers to another court department
  - Sheriff's fee to give notice
  - Court-appointed interpreter in small claims court
  - Court fee for phone hearing
- (List continued on next page.)



- 6 a. (1)
  - 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

(2)  **Additional Fee Waiver.** The court grants your request and waives the 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.

- |   |   |
|---|---|
| <input type="checkbox"/> Jury fees and expenses           | <input type="checkbox"/> Fees for a peace officer to testify in court   |
| <input type="checkbox"/> Fees for court-appointed experts | <input type="checkbox"/> Court-appointed interpreter fees for a witness |
| <input type="checkbox"/> Other( <i>specify</i> ):         |   |

b.  The court **denies** your fee waiver 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 of service on next page) to:

- Pay the ward’s or conservatee’s fees and costs, or
- File a new revised request that includes the items listed below (*specify incomplete items*):

\_\_\_\_\_

\_\_\_\_\_

(2)  The court **denies** your request because the information you provided on the request shows that the ward or conservatee is not eligible for the fee waiver you requested (*specify reasons*):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The court has enclosed a blank *Request for Hearing About Court Fee Waiver Order (Ward or Conservatee)(Superior Court)*, form FW-006-GC. You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the 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-GC to request hearing.*)

c.  The court needs more information to decide whether to grant your request. You must go to court on the date below. The hearing will be about (*specify questions regarding eligibility*):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Bring the following proof to support your request if reasonably available:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_




Name of (Proposed) Ward or Conservatee:

Case Number:

**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 the ward's or conservatee's 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.

**NOTE TO GUARDIAN or CONSERVATOR:** If there are unpaid court fees after a denial of a request for a fee waiver, your case—including the guardianship or conservatorship proceeding if the waiver is requested in that matter—might not go forward. After a denial, you may choose to advance the court costs yourself to ensure that the case proceeds. If you or another person is appointed as guardian or conservator, you would have an opportunity to be reimbursed for such advances from the assets of the guardianship or conservatorship estate, if any, as allowable expenses of administration. You might also have the right to reimbursement for advanced court costs from persons with an obligation to support the ward or conservatee from assets not part of his or her estate, such as a parent of the ward, the spouse or registered domestic partner of the conservatee who is managing the couple's community property outside the conservatorship estate, or the trustee of a trust of which the conservatee is a beneficiary.

	Date: _____	Time: _____	_____
	Dept.: _____	Room: _____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Name and address of court if different from above:

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, ②, and ④ 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, ②, and ④, from (city): \_\_\_\_\_, California on the date below.

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

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

**This is a Court Order.**

**Notice to Court of Improved Financial Situation or Settlement (Ward or Conservatee)****CONFIDENTIAL**

Clerk stamps date here when form is filed.

**1 (Proposed) guardian or conservator who asked the court to waive court fees for (proposed) ward or conservatee:**

Name: \_\_\_\_\_  
 Street or mailing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

**2 Lawyer, if person in 1 has one:**

Name: \_\_\_\_\_ State Bar No: \_\_\_\_\_  
 Firm or Affiliation: \_\_\_\_\_  
 Street or mailing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

**3 (Proposed) ward or conservatee:**

Name: \_\_\_\_\_  
 Street or mailing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_

**4 Lawyer for (proposed) ward or conservatee, if any:**

Name: \_\_\_\_\_ State Bar No: \_\_\_\_\_  
 Firm or Affiliation: \_\_\_\_\_  
 Street or mailing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Telephone: \_\_\_\_\_

**5 Date of the last court fee waiver order in this case (date): \_\_\_\_\_**

Fill in court name and street address:

**Superior Court of California, County of**

Court fills in case number when form is filed.

**Case Number:****Case Name:**

**Notice:** The court may order you to answer questions about the ward's or conservatee's finances after granting a waiver and may later order payment of the waived fees from his or her estate. If this happens and the fees are not paid, the court can also charge collection fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If there are additional changes in the ward's or conservatee's financial circumstances during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use another copy of this form.)

If this case is an action against another party and you win the case on behalf of the ward or conservatee, the trial court may order the other side to pay some or all of the waived fees. If you settle the matter 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.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

**6**  The ward's or conservatee's financial situation has changed since the date of the last court fee waiver order in a way that improves my ability as guardian or conservator to pay court fees and costs. I ask the court to do one of the following:

- a.  **End** the ward's or conservatee's fee waiver because his or her financial situation has improved and I am able to pay court fees and costs that are due after (date): \_\_\_\_\_
- b.  **Review** the ward's or conservatee's updated financial information in the attached *Request to Waive Court Fees*. I believe the ward or conservatee is still eligible for a fee waiver. (Complete form FW-001-GC and attach to this form.)



Name of (Proposed) Ward or Conservatee:

Case Number:

- 7  The ward's or conservatee's case has settled for (*check one*)  less than \$10,000  
 \$10,000 or more (*if so, complete a, b, and c below.*)
- a. The conservator (*check one*):  has  has not received the proceeds of the settlement.
- b. The name and address of the party who has agreed to pay the settlement:
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- c. That party's attorney, if any (*name, firm or affiliation, address, e-mail, phone number, and State Bar number*):
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**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*



i. Other facts which support this application are (describe unusual medical needs, expenses for recent family emergencies, or other unusual expenses to help the judge understand your budget). If more space is needed, attach page labeled "Attachment 5."

---

6. Estimated value of the property of the estate:
- a. Personal Property \$ \_\_\_\_\_
  - b. Annual gross income from
    - 1. Real property \$ \_\_\_\_\_
    - 2. Personal property \$ \_\_\_\_\_

7. I understand that this fee is subject to reconsideration after the investigation and I may be required to pay all or a portion of the investigation fee.

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

Dated: \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Type or print name)

**ORDER**

**It is ordered that the above Application for Deferral of Court Investigation Assessment is:**

**Granted**  
subject to reconsideration after the investigation

**Denied**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Judge of the Superior Court