FW-007 Notice on Hearing About Court Fees	Cierk stamps date here when form is filed.
Person who asked for the hearing: Name:	
Street or mailing address:	
City: State: Zip:	
Phone number:	
2 Lawyer, if person in 1 has one (name, address, phone number, e-mail, and State Bar number):	
	Fill out court name and street address:
	Superior Court of California, County of
The court received your request for a hearing about your court fees on (date):	
	Fill in case number and case name:
Read this form carefully. All checked boxes ☑ are court orders.	Case Number:
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4) The court grants your request for a hearing on your eligibility for a fee waiver. Go to your court hearing on the date below. You may bring information about your financial situation to the hearing.	Case Name:
Hearing Date: Time: Name and add Time:	dress of court if different from above:
The court denies your request for a hearing because (check all that apply a. The hearing request was not filed within ten days after the clerk for a fee waiver. (Government Code section 68634(g).) b. No request to waive fees has been denied by the court in your acceptable. Other (explain):	gave notice of the denial of the request
Date	Link Officer Clark Deserte
Signature of (check one): Jude Request for Accommodations: Assistive listening systems, computal language interpreter services are available if you ask at least five days to office for Request for Accommodation, Form MC-410.	ter-assisted real-time captioning, or sign
Clerk's Certificate of Service	
I certify that I am not involved in this case and (check one):	_
\square I handed a copy of this notice to the party and attorney, if any, listed in \bigcirc a	
This notice was mailed first class, postage paid, to the party and attorney, if from (<i>city</i>):, California on the date below.	any, at the addresses listed in \bigcirc and \bigcirc , low.
Date: Clerk, by	, Deputy