

**IN THE BISHOP PAIUTE TRIBAL COURT  
FOR THE BISHOP PAIUTE TRIBE  
BISHOP, CALIFORNIA  
APPLICATION FOR FILING FEE WAIVER/DISCOUNT**

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

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Work Phone#: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

**HOUSEHOLD INCOME**

(Gross Per Month, Include all Family Members Income)

**SELF    FAMILY MEMBERS**

Number of Individuals in Family:	
Number of Family Members Working:	

Earnings/Wages:		
Pension/Retirement:		
Social Security/SSI:		
Unemployment:		
Disability/IGA:		
TANF/AFDC:		
Total(s):		
<b>Total Family Income:</b> (add self + family members)		

I request this Court to waive or discount the standard filing fee in my case. I certify under penalty of perjury that the foregoing is true and correct. I understand that I am allowed two waiver/discounts per year. If I receive a waiver and **do not** appear in court I lose any future waivers for that year.

\_\_\_\_\_  
Petitioner/Respondent's Signature

\_\_\_\_\_  
Date

The Court having considered the request of the Petitioner/Respondent herein, and good cause appearing based on the above information, therefore, approves the request of the Petitioner/Respondent is hereby:

100% WAIVER GRANTED: \_\_\_ \$10 FILING FEE GRANTED: \_\_\_ \$20 FILING FEE GRANTED: \_\_\_  
REQUEST DENIED: \_\_\_

\_\_\_\_\_  
Bishop Paiute Tribal Court

\_\_\_\_\_  
Date