

Clerk stamps date here when form is filed.

Using this form

- If you can't afford to pay your fine, fill out this form to ask for a lower fine, a payment plan, more time to pay, and/or community service.
- You may use this form even if your fine has been sent to collections. If you have more than one fine, use one form for each fine.
- Mail or take this form to the court listed on your ticket. If you want to file the form electronically, ask the court if it allows "e-filing."
- If you lost your ticket or have questions, contact your court at www.courts.ca.gov/find-my-court.htm.

**Types of fines**

- Use this form for **traffic** fines (like speeding) or other infractions (like fishing without a license or drinking in public), not for misdemeanors.
- This form is **not for parking tickets**. Read your parking ticket to find out what you can do.
- Do not use this form for a dismissal or reduction of charges for tickets requiring proof of correction.

**Important!**

- **Do not** use this form to tell the court that you didn't do anything wrong. See the instructions on your ticket and visit www.courts.ca.gov/selfhelp.htm for more information on fighting it.
- This form cannot be used to sign up for traffic school. Please contact your court if you wish to request a reduction and traffic school.

1 Your information

Name: _____

Street or mailing address: _____ Street _____ City _____ State _____ Zip _____

Telephone: _____ OK to text you at this number?* No YesEmail (optional): _____ OK to email you at this email?* No Yes

* Some courts don't use text messages or email to contact court clients. Message and data rates would apply.



2 What type of income do you have?

- I do not get money from any source. (*Skip to ③*)
- I get public benefits. (*Check all that apply, then skip to ③*)
- CalFresh (food stamps)
 - General Assistance / county relief
 - SSP: State Supplementary Payment
 - CalWORKs: California Work Opportunity and Responsibility to Kids Act
 - CAPI: Cash Assistance Program for Immigrants
 - Unemployment compensation
 - None of the above
 - Medi-Cal
 - SSI: Supplemental Security Income
 - IHSS: In-Home Supportive Services
 - TANF: Temporary Assistance for Needy Families
 - WIC: California Special Supplemental Nutrition Program for Women, Infants, and Children
 - Other
- I do **not** get public benefits, but I get money from other sources. (*Answer all that apply*)
- a. How much money do you earn (take-home pay) or get from other sources (including income received in your family from a spouse or live-in romantic partner)?
\$ _____ every: (*Check one*)
 - Year
 - 2 weeks
 - Twice a month
 - Week
 - Month
 - Season
 - Other: _____
 - b. This money supports me and _____ other people.
 - c. If I pay the fine, I would: (*Check all that apply, if any*)
 - Not have enough money to pay my rent/mortgage. I pay \$ _____ for rent/mortgage every (*Check one*): Month Week Other: _____
 - Not have enough money to pay for other basic living expenses. *Basic living expenses are things like: food, utilities, childcare, child support, transportation, medication, insurance (medical, car, house, and rental), and student loans.*
 - Not have enough money to pay my debt for other court cases.
 - Have other problems (*please explain*):

3 Do you have anything that shows your public benefits, income, or expenses?

Things like an EBT card, paystubs, tax returns, rent or mortgage checks, or utility bills.



- a. Yes, I have attached **copies** to this form.

Important! *Keep the original documents for your own records. Any copies you attach can be destroyed after the court makes a decision on your case. Cross out any social security numbers, or other private information, on the copy you give the court.*

- b. No, I do not have any papers to show because:

4 Have you told the court before that you can't pay this fine?

Yes No, not that I can remember (*Skip to 5*)

What has changed in your family's life since then? (*Check all that apply, if any.*)

Lost job or reduced hours at work.

Started to receive public benefits.

Suffered a serious illness or disability.

Other: _____

5 What are you asking the court to do? (*Check all that you are willing and able to do*)

Lower the amount I owe on the fine. 

Payment plan: I want to pay:
\$ _____ every month on the
_____ day of the month,
until this fine is paid off.



More time to pay. Please change my
deadline to (*month/day/year*):



Community service instead of
paying the fine. I understand that
community service may not be
available on weekends or evenings.



- Not all courts offer all of these choices.
- Contact the court listed on your ticket to find out about your choices.
- Some fines can't be reduced just because you don't have the money to pay them. You may ask for more time to pay, community service, and/or monthly payments even if the court can't reduce the fine.

6 Other information:

List other facts (if any) about why you can't pay the fine or about your choices in 5. (*You can add extra pages or attach other documents that help you explain.*)

7 Plea selection (In order to submit your request using this form, if your case is unadjudicated, you need to admit responsibility for the ticket by entering a plea of **guilty** or **no contest**. If you do not want to admit responsibility or you do not understand your rights, do not use this form. Instead, contact your court to set up a court appearance.)

By entering a plea you will be giving up the following rights:

- To be represented by an attorney employed by you;
- To have a speedy and public trial in front of a judge;
- To testify, to present evidence, and to use court orders without cost to compel the attendance of witnesses and the production of evidence on your behalf;
- To have the witnesses against you testify under oath in court, and to question such witnesses; and
- To remain silent and not testify and not incriminate yourself.

Make a choice between pleading guilty or no contest. A no contest plea is a way of saying, “I don’t believe I did all that the officer charges, but I admit violating the law.”

Note: Once you admit responsibility, you will have a conviction for this traffic offense that will be reported to the Department of Motor Vehicles (DMV).

Your plea (*check one*):

- No contest plea.** I am the defendant in the case. I have read, understand, and waive the rights above; there are facts to support my plea; I am entering my plea freely and voluntarily, and I agree to plead “no contest.” I understand that, for purposes of this case, a plea of no contest will be considered the same as a plea of guilty and that if I plead no contest the court will find me guilty.
- Guilty plea.** I am the defendant in the case. I have read, understand, and waive the rights above; there are facts to support my plea; I am entering my plea freely and voluntarily; and I agree to plead guilty.

8 Read and sign below



I promise that the information above is correct. I declare under penalty of perjury, under the laws of the State of California, that all information on or attached to this form is true.

Date: _____

Type or print your name _____



Sign your name _____