

# Filing Fee Payment or Fee Waiver Request

## Applicant Information

Full Name:

Address:

Case Number:

## Fee Option

- ☐ I am paying the filing fee.
- ☐ I am requesting a fee waiver due to financial hardship.

## Fee Payment Details (if applicable)

Payment Method:  ▼

## Fee Waiver Request Details (if applicable)

Briefly state the reason for fee waiver request:

Submit