



Court Assistance Office

Forms Packet Instructions:

MOTION FOR FEE WAIVER

Court Assistance Office

Available Monday-Friday

Email: d6cao@bannock.idcourts.gov

Phone: 208-236-7067

Text: 208-538-4816

<https://isc.idaho.gov/district-6/family-court/court-assistance-office>

☒ Complete ALL of the following forms:

- Family Law Case Info Sheet OR Civil Law Case Info Sheet (CAO will provide you with correct one)
- Motion and Affidavit for Fee Waiver
- Proposed Order for Fee Waiver

☒ Email the forms back for review: d6cao@bannock.idcourts.gov

- If you printed your forms and need to scan them back to me, they must be in PDF format. We cannot accept phone images. **If you don't have access to a scanner, please visit the Bannock County Court Assistance Website for a list of scanning resources**



SCAN or CLICK on the QR Code to access more
resources on our Bannock CAO Website.

PLEASE NOTE:

You must file your Motion For Fee Waiver PRIOR to filing your petition. Once the judge has accepted or denied your fee waiver, you will then move on to STEP 1 of your filing process (Filing Your Petition).

FW INSTRUCTION 1 REQUESTING A WAIVER OF FILING AND SERVICE FEES

The law allows for a waiver of the fees payable to the court for filing paperwork and to the local sheriff for serving paperwork on the other party if the judge assigned to your case decides you are truly unable to afford those fees. (This is often called filing “in forma pauperis.”) You must get an order waiving the fees. To get a fee waiver order, you must complete a Motion and Affidavit for Fee Waiver and prepare an Order Re: Fee Waiver for the judge to sign. In the Affidavit, you will answer many questions about your income from all sources, your property, the number of people relying on you for support, and your ordinary and extraordinary living expenses. (Often a person seeking divorce is living apart from his or her spouse and has no access to the spouse's income and assets. If that is your situation, remember to include only income, property and those resources that actually are available to you. Do not include income and property of your spouse to which you have no access.) If you have long-standing debts, regardless of whether you are making payments on them now, be sure to list them. Also remember to include such expenses as driver's licenses, automobile license plates, and car insurance. Divide the total of those occasional expenses so you know what they would be each month. Your total list of expenses and your total list of income must demonstrate to the Court that, once you have met your other expenses, you have no money left over to file your paperwork.

1. Complete the form, Motion and Affidavit for Fee Waiver. Fill in ALL BLANKS. The judge may not consider your request if you do not answer all the questions. Complete the form, Order Re: Fee Waiver. Complete the top part of the form. Check the box to indicate if you are the Plaintiff or Defendant. Fill in your name and mailing address in the Clerk's Certificate of Service.
2. Sign and date the Motion and Affidavit certifying that the information is true and accurate, subject to the penalty of perjury if it is not. Make a copy of each document.
3. Prepare an envelope addressed to yourself with a postage stamp affixed. The copy of the Order Re: Fee Waiver, either granted or denied, can then be mailed to you by the judge's clerk.
4. Take the signed Motion and Affidavit for Fee Waiver, the completed Order Re: Fee Waiver, and the self-addressed postage paid envelope, your copies, and the document(s) you need to file (for example a Complaint with Summons or an Answer), to the District Court Clerk's office. Ask the clerk to submit the documents to a judge. The judge may sign the Order without a hearing. If the judge has any questions, you may have to appear for a court hearing. The court clerk will schedule your case before the judge at the earliest opportunity. On the date scheduled for your hearing, be sure to arrive at the courthouse a few minutes early. Check in with the court clerk to find out which courtroom you should be in. When the bailiff calls your case to be heard, you will then step forward, be sworn in, and be questioned by the judge about your Affidavit. If you are receiving public assistance, you should be prepared to provide the court with copies of the documents showing what assistance you receive. The judge may ask you questions about your expenses and lifestyle. Answer all questions respectfully and to the best of your ability. If the judge signs the Order, return to the court clerk after your hearing with the Order and The Clerk will file your original paperwork.
5. If the judge orders the waiver of prepaid fees, the clerk will file your paperwork.

If you are filing a Complaint, you will need to go to the courthouse and pick up your copies for service on the defendant (or you can provide a large self-addressed envelope with enough postage for the clerk to mail the copies of the Summons and Complaint to you so you can arrange service). **or**

If the judge denies your request for the fee waiver you will be required to pay the filing fee before your paperwork is filed.

If you need to file a response, be aware of the time limits. You should allow sufficient time to request the fee waiver before the expiration of any time limitations you need to meet. It is your responsibility to allow enough time for the process of getting the fees waived or to pay the filing fee within the time limit. Only you are responsible for making sure time limits are met. Requesting a fee waiver will not stop the time from running, and a default can be entered against you if the time limit allowed to file a response expires. You could then be prevented from filing your response.

CAO Online Form Review

COVER SHEET



Please select the type of form review you are submitting:

- | | |
|--|--|
| ☐ Divorce NO Minor Children | ☐ Mandatory Child Support Disclosures |
| ☐ Divorce WITH Minor Children | ☐ Eviction |
| ☐ Custody, Paternity, & Child Support | ☐ Forcible Detainer |
| ☐ Modification of Custody & Child Support | ☐ Name Change- ADULT |
| ☐ Family Case Response | ☐ Name Change- MINOR |
| ☐ Family Case Response & Counterclaim | ☐ Civil Case Answer |
| | ☐ _____ |
| | ☐ _____ |

I understand these forms will be scanned into electronic format and emailed to the Bannock County Court Assistance Officer who will perform a form review and aim to respond to me directly within 1-2 business days.

Please Note! You are your own Case Manager. The CAO Officer will assist you as You Direct. The CAO office processes MANY cases each day. We DO NOT track the status of your case. Thank you for working with us. NOTICE: The Court Assistance Officer does not represent parties or any of their interests. While confidentiality practices concerning anything discussed are utilized, it is not guaranteed. The Court Assistance Officer may provide services to the opposing party/ies (other person/s involved in the same case). The Court Assistance Officer can only give information; not interpretations of laws or strategies for any case. If seeking representation, a confidential consultation, or legal advice, you will have to consult with a private attorney.

IMPORTANT NOTICE REGARDING EXHIBITS AND EXPLICIT MATERIALS

The Court Assistance Office cannot receive, review, or transmit exhibits, photographs, videos, recordings, screenshots, or other materials containing nudity, sexual content, graphic images, or other explicit content by email. If your filing includes any exhibit or attachment that may contain explicit material, you must bring the documents to the courthouse for in-person review and filing. Court Assistance Officers may review the required court forms but will not accept explicit exhibits electronically. Any filing containing explicit materials may be required to be filed conventionally pursuant to Rule 5(f) of the Idaho Rules for Electronic Filing and Service.

NAME

DATE

EMAIL

PHONE

Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE _____ JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

_____,
Plaintiff,
vs.
_____,
Defendant.

Case No. _____

MOTION AND AFFIDAVIT FOR FEE
WAIVER

Please fill out ALL FIELDS on this form. If the answer is N/A, please indicate this.

☐ Plaintiff ☐ Defendant asks to start or defend this case without paying fees, Idaho Code
Section 31-3220, and certify:

1. This is an action for (type of case) _____.
2. I am unable to pay the court costs. I verify that the statements made in this Affidavit are true and correct. I understand that a false statement in this Affidavit is perjury and I could be sent to prison for one to 14 years. The waiver of payment does not prevent the court from later ordering me to pay costs and fees.

(Do not leave any items blank. If any item does not apply, write "N/A". Attach additional pages if more space is needed for any response.)

IDENTIFICATION AND RESIDENCE:

Name: _____ Other name(s) I have used: _____

Address: _____

How long at that address? _____ Phone: _____

Year and place of birth: _____

Education completed (years): _____

FAMILY:

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed ☐ Separated

The following minor children live with me:

Name (use initials only)	Age	Relationship	Child Support Received (\$/month)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT:

Occupation: _____ Employed by: _____

Position: _____ Salary: \$ _____ or \$ _____ per hour

Monthly gross income \$ _____ If your current position is temporary what are the

start and end dates? _____

Phone number to use to verify: _____ If you have held this job less than

one year, previous employer: _____

Phone number to use to verify: _____

Spouse's Occupation: _____ Employed by: _____

Position: _____ Salary: \$ _____ or \$ _____ per hour

Monthly gross income \$ _____ If your spouse's current position is

temporary what are the start and end dates? _____

I receive assistance or support from the following sources and in the following monthly amounts:

Spouse: \$ _____ Welfare: \$ _____ Food Stamps: \$ _____ Relatives: \$ _____

Unemployment Compensation: \$ _____ Social Security: \$ _____ Retirement: \$ _____

Former Spouse: \$ _____ Other (identify) _____ \$ _____

If unemployed, how long since your last regular employment? _____

List all places where you have applied for work in the last six months:

Company	Last Applied	Reason for Rejection
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are you willing to work now? _____ What work can you do? _____

What is the minimum wage for which you are willing to work? \$ _____

List all employers you worked for during the last three years.

Company	Date Terminated	Ending Salary	Reason for Termination
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you capable of working now? ☐ Yes ☐ No If no, why not? _____

If a health problem keeps you from working, provide the name of your treating doctor: _____

_____. Is your health problem permanent? ☐ Yes ☐ No

When will you be released to work? _____

ASSETS:

List all real property (land and buildings) owned or being purchased by you.

Address	City	State	Legal Description	Value	Your Equity
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List all other property owned by you and state its value.

Description (provide description for each item)	Value
Cash_____	_____
Notes and Receivable_____	_____
Vehicles_____	_____
Bank/Credit Union/Savings/Checking Accounts_____	_____
Stocks/Bonds/Investments/Certificates of Deposit_____	_____
Trust Funds_____	_____
Retirement Accounts/IRAs/401(k)s_____	_____
Cash Value Insurance_____	_____
Motorcycles/Boats/RVs/Snowmobiles_____	_____
Furniture/Appliances_____	_____
Jewelry/Antiques/Collectibles_____	_____
TVs/Stereos/Computers/Electronics_____	_____
Tools/Equipment_____	_____
Sporting Goods/Guns_____	_____
Horses/Livestock/Tack_____	_____
Other (describe)_____	_____
_____	_____
_____	_____
_____	_____

EXPENSES: (List all of your monthly expenses.)

Expense	Average Monthly Payment
Rent/House Payment	_____
Vehicle Payment(s)	_____
Credit Cards (List last 4 digits of each account number.)	
_____	_____
_____	_____
_____	_____
_____	_____
Loans (name of lender and reason for loan)	
_____	_____
_____	_____
_____	_____
_____	_____
Electricity/Natural Gas _____	_____
Water/Sewer/Trash _____	_____
Phone _____	_____
Cellular Phone _____	_____
Cable/Satellite TV/Internet _____	_____
Groceries _____	_____
Dining Out _____	_____
Clothing _____	_____
Auto Fuel/Transportation _____	_____
Auto Maintenance _____	_____
Cosmetics/Haircuts/Salons _____	_____
Entertainment/Books/Magazines _____	_____
Home Insurance _____	_____
Auto Insurance _____	_____

Life Insurance _____	_____
Expense (continued)	Average Monthly Payment
Medical Insurance _____	_____
Medical Expense _____	_____
Child Care _____	_____
Other (describe) _____	_____
_____	_____
_____	_____

MISCELLANEOUS:

How much can you borrow? \$ _____ From whom? _____

When did you file your last income tax return? _____ Amount of refund: \$ _____

PERSONAL REFERENCES: (These persons must be able to verify information provided.)

Name	Address	Phone	Years Known
_____	_____	_____	_____
_____	_____	_____	_____

CERTIFICATION UNDER PENALTY OF PERJURY

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Date: _____

Typed/printed

Signature

Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address

IN THE DISTRICT COURT FOR THE _____ JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

_____ Plaintiff, vs. _____ Defendant.	Case No. _____ ORDER RE: FEE WAIVER
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Having reviewed ☐ Plaintiff's ☐ Defendant's Motion and Affidavit for Fee Waiver,
☐ THIS COURT ORDERS the waiver of prepaid fees.
☐ THIS COURT DENIES the waiver because the Court finds the applicant is not
indigent pursuant to Idaho Code §31-3220.

Date: _____ Judge _____

CLERK'S CERTIFICATE OF SERVICE

I certify that a copy of this Order was served:

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

- ☐ By United States mail
☐ By personal delivery
☐ By fax (number) _____
☐ By Email:

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

- ☐ By United States mail
☐ By personal delivery
☐ By fax (number) _____
☐ By Email:

Date: _____

Deputy Clerk

STOP

WOULD YOU LIKE YOUR FORMS
REVIEWED BY THE COURT
ASSISTANT OFFICER?

Scan & Email your forms to
d6cao@bannock.idcourts.gov

You may also call 208-236-7067 or
text 208-538-4816 and request an in-
person form review