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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

|  |  |
| --- | --- |
| In the Matter Of:      , | Case No.  ORDER RE: FEE WAIVER |

Having reviewed this 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) |
| (Name)    (Street or Post Office Address)    (City, State, and Zip Code) | * By United States mail * By personal delivery * By fax (number) |
| Date: | Deputy Clerk |