

<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE</b> <input type="checkbox"/> Central - 700 Civic Center Dr. West, Santa Ana, CA 92701-4045 <input type="checkbox"/> Harbor - 4601 Jamboree Rd., Newport Beach, CA 92660 <input type="checkbox"/> North - 1275 N. Berkeley Ave., Fullerton, CA 92838 <input type="checkbox"/> West - 8141 13th Street, Westminster, CA 92683	Court Use Only     Citation/Case Number:  OC Pay Number:
<b>CANNOT AFFORD TO PAY FINE: TRAFFIC OR OTHER INFRACTIONS (CONFIDENTIAL)</b>	

### Using this form:

- If you cannot afford to pay your fine, fill out this form to request a fine reduction, payment plan, more time to pay, and/or community service.
- Use this form for traffic fines or other infractions.
- You may use this form if your fine has been sent to collections.
- If you have more than one citation, use a separate form for each citation.
- Mail or take this form to the court listed on your ticket.

### 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.occourts.org/directory/traffic/general-information/fees.html](http://www.occourts.org/directory/traffic/general-information/fees.html).

#### ① Your Information

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Street/Mailing Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ OK to use this number for court reminders? ☐ Yes ☐ No

*Select 'Yes' if you authorize the court to send automated call reminders. Message & Data Rates may apply.*

Email (optional): \_\_\_\_\_ OK to send notices to this email? ☐ Yes ☐ No

*Select 'Yes' if you authorize the court to send electronic notices.*

#### ② 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 the court to schedule 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
- To remain silent and not testify and not incriminate yourself;

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*(Plea selection continued)*

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 agree to plead guilty.

### ③ What type of income do you have?

☐ I do not receive money from any source. *(Skip to Step 4)*

☐ I receive public benefits. *(Check all that apply, then skip to Step 4)*

For example:

☐ Food stamps (CalFresh)

☐ State Supplementary Payment (SSP)

☐ Medi-Cal

☐ County Relief/General Assistance

☐ CalWORKs or Tribal TANF

☐ In-Home Supportive Services (IHSS)

☐ Supplemental Security Income (SSI)

☐ Cash Assistance Program for Immigrants (CAPI)

☐ Unemployment compensation

☐ WIC: California Special Supplemental Nutrition

☐ Other need-based aid *(specify)*: \_\_\_\_\_

☐ I do **not** receive public benefits, but I receive money from other sources. *(Answer all that apply)*

a. How much money do you earn *(take-home pay)* or receive from other sources *(including income received in your family from a spouse or domestic partner)*?

\$\_\_\_\_\_ every: *(Check one)*

☐ Year

☐ Every Other Week

☐ Week

☐ Month

☐ 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. List other court cases:

☐ have other problems. *(Please explain):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**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** of supporting documents.

*Important! Only send copies (be sure to cross out any confidential information), keep the original documents for your own records. Any copies you attach can be destroyed after the court makes a decision on your case.*

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

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**④ Have you already told the court before that you cannot pay this fine?**

- ☐ Yes ☐ No (Skip to Step 3)

What circumstances have changed? (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: \_\_\_\_\_

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

- ☐ Lower the amount I owe on the fine.
- ☐ Payment plan: I want to pay the total fine as: \$ \_\_\_\_\_  
every month on the \_\_\_\_\_ day of the month, until this fine  
is paid off.



- ☐ More time to pay:  
Please change my deadline to (month/date/year): \_\_\_\_\_



- ☐ Community service instead of paying the fine. I understand that  
community service may not be available on weekends or  
evenings and other fees will apply.



- ☐ I declare that I have no physical limitations that may prevent my  
acceptance into the program.

- ☐ Cancel or lower my civil assessment that was previously imposed for failing to appear on time.



- Some fines cannot be reduced just because you don't have the money to pay.
- You may ask for more time to pay, community service, and/or monthly payments even if the court cannot reduce the fine.

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⑥ **Other information:**

List other facts (if any) about why you cannot pay the fine or about your choices in Step 5, (attach other documents that help you explain).

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⑦ **Traffic School:**

☐ I am the defendant in the case and I request traffic school.

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. Perjury is a felony in California and is punishable by imprisonment in the county jail for two, three, or four years. (Penal Code § 126)."*

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or print your name



\_\_\_\_\_  
Sign your name

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