

Instructions

Request to Waive Court Fees and Costs

[Minn. Stat. § 563.01](#)

(revisor.mn.gov/statutes/cite/563.01)

Important Notices and Resources

The Court has forms and instructions, for some types of cases, as a general guide to the court process. These instructions explain the steps in more detail and answer common questions but are not a full guide to the law. Court employees may be able to give general information on court rules and procedures, but they cannot give legal advice.

Have questions about court forms or instructions?

- Visit www.MNCourts.gov/SelfHelp
- Call the Statewide Self-Help Center at 651-435-6535

Not sure what to do about a legal issue or need advice?

- Talk with a lawyer.
- Visit www.MNCourts.gov/Find-a-Lawyer.aspx

Helpful materials may be found at your public county law library. For a directory, see <https://mn.gov/law-library/research-links/county-law-libraries.jsp>. For more information, contact court administration or call the Minnesota State Law Library at 651-297-7651.

Forms You Will Need to Ask for a Fee Waiver

- *Affidavit to Request Fee Waiver* (FEE102); and
- Your pleadings (the forms you plan to file), unless you are asking for a fee waiver only to cover copy costs.

You can:

- Download the fee waiver forms from mncourts.gov/forms under the “Fee Waiver” category or
- Create the forms online using [Guide & File](http://mncourts.gov/Help-Topics/Guide-and-File.aspx) (mncourts.gov/Help-Topics/Guide-and-File.aspx);
- **or**
- Get the forms at a [courthouse](http://mncourts.gov/Find-Courts.aspx) (mncourts.gov/Find-Courts.aspx).



Instructions are also available in Hmong, Somali, and Spanish:

<https://mncourts.gov/GetForms.aspx?c=19&p=69>.

General Information

You can learn more about fee waivers in the [“Fee Waiver” Help Topic](#) on the MN Judicial Branch website (mncourts.gov/Help-Topics/Fee-Waiver-IFP.aspx).

Fees and Costs

There is usually a fee to file documents with the court, to have the sheriff’s office personally serve legal papers on another party, and to get copies of documents from a court file. If you have a **low income and cannot afford to pay** the fees, then you can ask the court to waive the fees.

You may qualify for a fee waiver if you fit into any 1 of these 4 categories:

1. You receive public assistance, OR
2. You have a free lawyer from a legal service provider; OR
3. Your income is below a certain amount (see Federal Poverty Guideline chart below*), OR
4. Your income is not enough to pay for the common necessities of life for yourself and the people you support, and also to pay court fees and costs.

*Under category 3, you qualify if your household’s total income, before taxes are taken out, is **less than 125%** of the Federal Poverty Guidelines for your household size. To qualify under category 3, your household needs to make **less than** what is listed in the chart below.

Your **household** includes:

- Yourself;
- Your spouse or significant other;
- Your minor children; and
- Other dependents living in your home.
 - **Dependents** are people who rely on you for most of their financial support and can include parents, unmarried partner who does not work outside the home, or extended family members.

2025 – 125% of Federal Poverty Guideline Chart

Number of People in Household	Yearly Household Income (before taxes)	Monthly Household Income (before taxes)	Weekly Household Income (before taxes)
1	\$19,562	\$1,630	\$376
2	\$26,437	\$2,203	\$508
3	\$33,312	\$2,776	\$641
4	\$40,187	\$3,348	\$772
5	\$47,062	\$3,921	\$905
6	\$53,937	\$4,494	\$1,037
7	\$60,812	\$5,067	\$1,170
8	\$67,687	\$5,640	\$1,301

If you have more than 8 members in your household, add \$6,875 annually for **each** additional household member (or \$573 monthly or \$133 weekly).

Step 1

Fill out the *Affidavit to Request Fee Waiver (FEE102)*

The Caption

The top part of the first page is where you will find the case caption.

See Instructions (FEE101) for help in filling out this form.

State of Minnesota	District Court
County of: _____	Court File Number: _____
Judicial District: _____	Case Type: _____
_____ Plaintiff/Petitioner	
VS/AND	
_____ Defendant/Respondent	

Affidavit to Request Fee Waiver (FEE102)
Minn. Stat. § 563.01

Fill it out the way you did for the other forms you plan to file with Court Administration, or like the other forms already filed in the case.

- List the county where the court case is or will be filed.
- List the judicial district. Each county is located in 1 of 10 [judicial districts](http://mncourts.gov/Find-Courts.aspx) (mncourts.gov/Find-Courts.aspx).
- If you already have a court file number, list it in the caption. Otherwise, leave it blank.
- List the case type. If you need help figuring out what the correct case type is, see the “Civil Case Type Index,” found online under the “eFile and eServe Resources” tab at www.mncourts.gov/File-a-Case/File-in-A-District-Trial-Court.aspx.

The Affidavit

Fill out the rest of the *Affidavit to Request Fee Waiver*. This is a confidential form that only the court will see.

1. I am a party in this action. I am not filing on behalf of a business. In good faith, I ask for a court order waiving court fees and costs. I cannot support my family and myself and also pay or give security for costs.

2. I believe that I have good reasons for making this request.
Choose one:
 I am including my pleadings with this *Affidavit* (or I have already filed my pleadings but have not yet paid the filing fee).
→ Examples of pleadings include the petition, complaint, answer, motion, etc.
OR
 I only want to have copy fees waived. I do not have any pleadings to file at this time.

1. You do not have to do anything in paragraph #1. This is a statement letting the Court know:
 - Who you are (a person, and not filing on behalf of a business);
 - What you are asking for (an order waiving court fees and costs); and
 - That you cannot support yourself and your family AND pay court fees and costs.
2. In paragraph #2, you are making a statement that you believe you have good reasons for asking for a fee waiver.
Then choose the box letting the Court know whether:
 - You have pleadings (court papers such as a petition, complaint, answer, motion, etc.), OR
 - You are just asking for copy fees to be waived.

3. I have a lawyer through a civil legal services program or volunteer attorney program that gives legal services to people with low incomes.

My lawyer's name is: _____

My lawyer works or volunteers for: _____

3. Check the box at #3 **if you are represented by an attorney** through a civil legal services or volunteer attorney program (a program that gives legal services to people with low incomes).
If you check the box in paragraph #3, fill in your lawyer's name and who your lawyer works or volunteers for.



If you checked #3, skip to the end of the *Affidavit* and sign the last page. You do not need to fill out the rest of the form.

If you did not check #3, continue answering the questions on the *Affidavit*.

4. I do not receive public assistance. (If checked, skip to #5)

OR

I receive public assistance. (Choose "a" or "b")

a. I receive public assistance under one or more of the following programs:

SSI (Supplemental Security Income)

4. In the first part of paragraph #4, check the box showing whether you receive public assistance. If you check the first box saying you DO NOT receive public assistance, then skip to paragraph #5.
If you checked the second box saying you DO RECEIVE public assistance, then choose "a" or "b" and give the requested information.

a. I receive public assistance under one or more of the following programs:

- SSI (Supplemental Security Income)
- MSA (Minnesota Supplemental Security Aid) or Emergency MSA
- GA (General Assistance) or Emergency GA
- SNAP (Supplemental Nutrition Assistance Program, also known as food stamps)
- MFIP (Minnesota Family Investment Program), MFIP Diversional Work Program (DWP), or Work Participation Cash Benefit
- MinnesotaCare or Medical Assistance
- Receipt of part D extra help or payment by the government of Medicare part B premiums
- Emergency Assistance or county crisis funds;
- Energy or Fuel Assistance

OR

b. I receive public assistance through a different program based on my income: (list the program) _____

I will include proof that I receive public assistance listed in 4a and 4b.

→ Examples of proof include a copy of EBT card, statement of benefits, benefits award letter, cancelled check from an agency, etc.



If you receive public assistance, include **proof of the public assistance** when you file the *Affidavit*.



If you checked #4a, skip to the end of the *Affidavit* and sign the last page. You do not need to fill out the rest of the form.

If you checked #4b, continue filling out the form.

5. My household size is _____.

→ Include yourself, your spouse or significant other, your children who are under age 18 (or over 18 but still in high school), and other dependents in your home. Dependents are people who rely on you for most of their financial support, and can include parents, children over the age of 18, or extended family members.

My household, other than myself, includes:

Name	Age	Relationship to you

If you need more space, add another sheet of paper with your name and court file number, if you know it.

5. List your household size (including yourself). If there is more than one person in your household, list the other household members' names.

There is room to list five names on the *Affidavit*. If you need more space, add another sheet of paper that includes your name and your court file number (if you know it).

Paragraphs #6 through #9 are about income (yours and others').

6. Paragraph #6 has three parts.

In the first part, tell where all of your income comes from. Check all of the boxes that apply to your situation. If a source of your income is not listed, then check "Other," and fill in the source.

6. I receive income from the following sources (check all that apply):		
<input type="checkbox"/> Job/wages	<input type="checkbox"/> Unemployment	<input type="checkbox"/> Social Security
<input type="checkbox"/> Child Support	<input type="checkbox"/> Spousal Support	<input type="checkbox"/> Trust Income
<input type="checkbox"/> Other (for example: disability, pension, rental income): _____		

The second part of the form has information on how to calculate your **monthly** income. It also tells how to calculate your **average monthly** income if your income changes a lot from month to month.

<p>→ Include income from all the sources you checked above. To calculate monthly income you get from a job:</p> <ul style="list-style-type: none">• Multiply the number of hours worked per week by your hourly pay to get the weekly amount.• Then multiply that by 4.33 to get the monthly amount.• In summary: hours per week x hourly pay x 4.33 = monthly income before taxes and deductions). <p>→ If your monthly income changes a lot from month to month, then you should answer the question below based on your <i>average</i> monthly income for the last 6 months. To calculate your average income:</p> <ul style="list-style-type: none">• Add your total monthly income from the last 6 months.• Then divide that number by 6• In summary: last 6 months of income added together ÷ 6 = average monthly income.

In the third part of paragraph #6, list your monthly income (before taxes and deductions).

NOTE: If your monthly income changes a lot from month to month, then check the box next to **average** monthly income. Fill in your average monthly income.

My total monthly income (before taxes and deductions) is \$ _____
OR
<input type="checkbox"/> My average monthly income (before taxes and deductions) is \$ _____

7. Paragraph #7 is about a spouse's income (if you are married).

- In the first part of paragraph #7, check the box or boxes telling about your marital status.
- If you are married, separated, or getting a divorce, then list your spouse's total monthly expenses (before taxes and deductions), and list the source of that income.
- If you do not know what your spouse's income is, there is a space on the form for you to explain why.

8. Paragraph 8 is about income from any other family member or dependent.

OR

Check the second box if there is a family member or dependent living with you who have income. Then fill in the table with the person's name, amount of monthly income, and the source of that income.

9. In paragraph #9, list your **household's yearly income**. To get this amount, you will add all of the monthly income together, then multiply by 12 to get your household's yearly income.

→ Your monthly income + other household members' and dependents' monthly income = total household **monthly** income.

→ Total household monthly income X 12 = total household **yearly** income.

NEXT, look at the [Federal Poverty Guideline chart](#) above (in the "General Information" section).

9. My household's total **yearly** income (before taxes and deductions) is \$ _____

This is **less** than 125% of the Federal Poverty Line for my household size of _____

OR

This is **more** than 125% of the Federal Poverty Line for my household size of _____

→ Find the Federal Poverty Guidelines in the Fee Waiver Instructions (FEE101).

I have attached proof of my household income.

→ Examples of proof include most recent tax returns, pay stubs of all household members with income, etc.

After you list the household's **yearly income**, check one of the boxes to tell whether that income is **less than** or **more than** 125% of the Federal Poverty Line for your household.

List the number of people in your household.



• Include **proof of your household income** when you file the *Affidavit*.



If your household income is less than 125% of the Federal Poverty Line, skip to the end of the *Affidavit* and sign the last page. You do not need to fill out the rest of the form.

Paragraphs #10 through #13 are about expenses, debts, and assets.

10. In paragraph #10, list your monthly expenses. If there is a category on the form that is not one of your monthly expenses, list zero (0).

10. I pay the following **monthly expenses**:

→ Include amounts you pay for yourself, your spouse or significant other, your minor children, and other dependents in your home; if you do not have the expense, list \$0.

Rent or mortgage:	\$ _____	Child support:	\$ _____
Utilities:	\$ _____	Childcare:	\$ _____
Food:	\$ _____	Medical insurance:	\$ _____
Car payments:	\$ _____	Cell phone:	\$ _____
Car insurance:	\$ _____	Other (explain):	\$ _____
Spousal support:	\$ _____		_____

- 11. List the total amount of your debt in paragraph #11. Do not include car loans, real estate loans, or mortgages.
- 12. List the amount of cash and the amount of funds you have on deposit in a financial institution (bank, credit union, etc.). If you do not have cash, or if you do not have any funds in a financial institution, list zero (0).
- 13. List your assets (property you own) in paragraph #13.
- 14. Paragraph #14 is where you can explain other reasons why you cannot afford to pay the court fees.

Step 2
Sign the Form



Date and sign the last page of the *Affidavit to Request Fee Waiver* (FEE102). Fill out your personal contact information under your signature. Finally, add the county and state you are in when you sign the form.

By signing the *Affidavit* under penalty of perjury, you are stating that the information in the *Affidavit* is true to the best of your knowledge. If you give false information on the form, you may be charged with a crime.

Step 3
Collect proof of public assistance or financial need

You can prove you receive public assistance by giving the court a copy of:

- EBT card, statement of benefits, benefits award letter, cancelled check from agency, etc.

You can prove financial need by giving the court a copy of:

- tax returns, pay stubs, bank statements, bills, statements showing expenses, etc.

Step 4 Make Copies

Make copies of all of the documents you plan to file with the court. This includes:

- Your pleadings (complaint, petition, answer, motion, etc.);
- Your *Affidavit to Request Fee Waiver* (FEE102); and
- Any proof of public assistance or financial need.

Step 5 File the forms with Court Administration

Put these things together:

- Your completed *Affidavit to Request Fee Waiver* (Fee102);
- The pleadings (petition, complaint, motion, answer, etc.);
- Proof of public assistance (if you receive it); and
- Proof of your financial situation.

File these documents with Court Administration either at the courthouse or electronically.

- **At the Courthouse**

This can be done either in person at the courthouse or by mail. Addresses for courthouses are online at www.mncourts.gov/Find-Courts.aspx. Use the drop-down menu or map to find your county.

- **Electronic Filing through the eFS System**

The eFS System allows you to eFile your completed forms. Information on eFiling is on the MN Judicial Branch website at www.mncourts.gov/eFile under the “eFile and eServe Training” tab.

Once you choose to eFile, you must eFile for the rest of the case. See [Minn. Gen. R. Prac. 14.01\(b\)\(5\)\(i\)](#) (revisor.mn.gov/court_rules/gp/id/14/).

Step 6 Judicial Officer reviews Fee Waiver Request

The judicial officer will grant or deny your request.

- If the judicial officer grants your fee waiver request, they will sign a *Fee Waiver Order* that waives all or part of the filing fee. Keep your copy of the *Fee Waiver Order* in a safe place.
 - If your fee waiver was **granted in full**, you will not have to pay any filing fees, service and publication fees, or copy fees for the case in which your fee waiver was granted.
 - If your fee waiver was **granted in part**, you will have to pay part of the fees and costs.
 - A fee waiver is good for **1 year**. You can apply again after the fee waiver order expires.
- If the judicial officer denies your fee waiver request, you will have to pay the court fees and costs.