

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

- BANNING** 311 E. Ramsey St., Banning, CA 92220
- BLYTHE** 265 N. Broadway, Blythe, CA 92225
- HEMET** 880 N. State St., Hemet, CA 92543
- INDIO** 46-200 Oasis St., Indio, CA 92201

- MORENO VALLEY** 13800 Heacock St., Ste. D201, Moreno Valley, CA 92553
- MURRIETA** 30755-D Auld Rd., Ste. 1226, Murrieta, CA 92563
- PALM SPRINGS** 3255 E. Tahquitz Canyon Way, Palm Springs, CA. 92262
- RIVERSIDE** 4050 Main St., Riverside, CA 92501

RI-MC006

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar Number and Address</i>)</p> <p>TELEPHONE NO: _____ FAX NO. (<i>Optional</i>): _____</p> <p>E-MAIL ADDRESS (<i>Optional</i>): _____</p> <p>ATTORNEY FOR (<i>Name</i>): _____</p>	<p align="center"><i>FOR COURT USE ONLY</i></p> <p>CASE NUMBER (<i>IF APPLICABLE</i>): _____</p>
<p>PLAINTIFF/PETITIONER: _____</p> <p>DEFENDANT/RESPONDENT: _____</p>	
<p>REQUEST FOR REFUND OF <input type="checkbox"/> FILING FEES <input type="checkbox"/> COURT REPORTER FEES <input type="checkbox"/> JURY FEES</p> <p><input type="checkbox"/> PROBATE INVESTIGATOR FEES <input type="checkbox"/> COURT ORDERED CASH BOND RETURNED <input type="checkbox"/> OTHER</p>	

I am requesting a refund in the amount of \$ _____ .

Reason(s): _____

Date of payment/deposit: _____ Amount Paid: \$ _____ Receipt # : _____

Depositor (printed name): _____

Address: _____
(NUMBER) (STREET) (CITY) (STATE) (ZIP)

Type of credit card: American Express Discover Master Card Visa

Last four digits of card number: _____

Date: _____ Signature: _____

<p>TO BE COMPLETED BY COURT</p> <p>Request for refund: <input type="checkbox"/> Approved <input type="checkbox"/> Denied</p> <p>Date: _____ By: _____</p>
