

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

- | | |
|---|---|
| <input type="checkbox"/> BANNING 311 E. Ramsey St., Banning, CA 92220 | <input type="checkbox"/> MURRIETA 30755-D Auld Rd., Ste. 1226, Murrieta, CA 92563 |
| <input type="checkbox"/> BLYTHE 265 N. Broadway, Blythe, CA 92225 | <input type="checkbox"/> PALM SPRINGS 3255 E. Tahquitz Canyon Way, Palm Springs, CA. 92262 |
| <input type="checkbox"/> HEMET 880 N. State St., Hemet, CA 92543 | <input type="checkbox"/> RIVERSIDE 4050 Main St., Riverside, CA 92501 |
| <input type="checkbox"/> INDIO 46-200 Oasis St., Indio, CA 92201 | <input type="checkbox"/> TEMECULA 41002 County Center Dr., Ste. 100, Temecula, CA 92591 |
| <input type="checkbox"/> MORENO VALLEY 13800 Heacock St., Ste. D201, Moreno Valley, CA 92553 | |

RI-MC006

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

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: _____

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