

**TR-320/CR-320 Can't Afford to Pay Fine:  
Traffic and Other Infractions**

**CONFIDENTIAL**

*Clerk stamps date here when form is filed.*

**Using this form**

- If you can't afford to pay your fine, fill out this form to ask for a lower fine, a payment plan, more time to pay, and/or community service.
- Use this form **after** the court has decided that you owe the fine. You may use this form even if your fine has been sent to collections. If you have more than one fine, use one form for each fine.
- Mail or take this form to the court listed on your ticket. If you want to file the form electronically, ask the court if it allows "e-filing."
- If you lost your ticket or have questions, contact your court at [www.courts.ca.gov/find-my-court.htm](http://www.courts.ca.gov/find-my-court.htm).



*Fill in court name and street address:*

**Superior Court of California, County of  
STANISLAUS  
TRAFFIC DIVISION  
2260 FLOYD AVE  
MODESTO, CA 95355**

**Types of fines**

- Use this form for **traffic** fines (like speeding) or other infractions (like fishing without a license or drinking in public).
- This form is **not for parking tickets**. Read your parking ticket to find out what you can do.



*Fill in the case number and ticket number (if you have it):*

**Case Number:** \_\_\_\_\_

---

**Ticket Number:** \_\_\_\_\_

**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.courts.ca.gov/selfhelp.htm](http://www.courts.ca.gov/selfhelp.htm) for more information on fighting it.

**1 Your information**

Name: \_\_\_\_\_

Street or mailing address: \_\_\_\_\_  
*Street City State Zip*

Telephone: \_\_\_\_\_ \* OK to text you at this number?  Yes  No

Email (optional): \_\_\_\_\_ \* OK to email you at this email?  Yes  No

*\* Some courts don't use text messages and email to contact court clients. Message and data rates would apply.*

**2 What type of income do you have?**

I do not get money from any source. (Skip to 3)

I get public benefits. (Check all that apply, then skip to 3)

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)

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



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

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

\$ \_\_\_\_\_ every: (*Check one*)     Year     2 weeks     Twice a month  
 Week     Month     Season  
 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.

Have other problems (*please explain*):

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

**3 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** to this form.

**Important!** *Keep the original documents for your own records. Any copies you attach can be destroyed after the court makes a decision on your case. Cross out any social security numbers, or other private information, on the copy you give the court.*

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

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

**4 Have you told the court before that you can't pay this fine?**

Yes     No, not that I can remember (*Skip to 5*)

What has changed in your family's life since then? (*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: \_\_\_\_\_

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



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

Lower the amount I owe on the fine.



Payment plan: I want to pay: \$ \_\_\_\_\_ every month on the \_\_\_\_\_ day of the month, until this fine is paid off.




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



Community service instead of paying the fine. I understand that community service may not be available on weekends or evenings.





- Not all courts offer all of these choices.
- Contact the court listed on your ticket to find out about your choices.
- Some fines can't be reduced just because you don't have the money to pay them. You may ask for more time to pay, community service, and/or monthly payments even if the court can't reduce the fine.

Cancel or lower late charges that I have for missing a hearing or failing to pay my fine on time.

**6 Other information:**

List other facts (if any) about why you can't pay the fine or about your choices in **5**. (You can add extra pages or attach other documents that help you explain)

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

**7 Driver's license "hold" or suspension**

Did you miss a court date or fail to pay a fine? If so, the Department of Motor Vehicles (DMV) might have suspended or put a "hold" on your driver's license. If the court clears your failure to appear or failure to pay, the court can notify the DMV. You must still contact the DMV to get your license back.

**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.**

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

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



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