The State Bar of California

OFFICE OF FINANCE

180 Howard Street, San Francisco, CA 94105

Refund@calbar.ca.gov

REQUEST FOR REFUND FORM

INDIVIDUAL AND ATTORNEY LICENSING FEES:

State Bar Rule 2.14 states: "Unless these rules provide otherwise, a licensee is not entitled to a refund of annual license fees because of death, resignation, disbarment, transfer to inactive status, entering judicial office, or for any other reason."

Complete and submit this form to request a refund for payment of fees submitted in error. Request for refunds must be submitted within 60 days of payment and may take up to 90 days to process. Refunds for duplicate license fee payments will be given priority. Credit card service fees are non-refundable.

Attorney Name: _____ Bar Number: _____

Amount Paid: _____ Date Paid: _____

Refund Request Amount: ☐ Full Refund ☐ Partial Refund

Partial Refund Amount: _____

LAW CORPORATION & LIMITIED LIABILITY PARTNERSHIP REGISTRATION FEES:

Request for refunds must be submitted within 60 days of payment and will not be processed until 60 days from date of payment. Credit card service fees are non-refundable.

LC/LLP Name_____ Agency/Firm or Reg #_____

Amount Paid: _____ Date Paid: _____

Refund Request Amount: ☐ Full Refund ☐ Partial Refund

Partial Refund Amount: _____

PAYMENT METHOD

☐ CHECK Check Number: _____

OR

☐ ONLINE Confirmation Number: _____

Credit Card Type: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Last 4 digits of Credit Card: _____

CONTACT INFORMATION

Name: _____ Phone: _____

Address: _____ Email: _____

REASON FOR REFUND REQUEST (including Waiver) – Please explain below.

EMAIL COMPLETED FORM TO:

Refund@calbar.ca.gov

OR

MAIL COMPLETED FORM TO:

The State Bar of California
Billing - Refund Requests
180 Howard Street
San Francisco, CA 94105

FOR OFFICIAL STATE BAR USE ONLY

Finance Approval: _____ Amount: _____ Date: _____