



**UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF NEW HAMPSHIRE**

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**REQUEST FOR REFUND OF ERRONEOUS OR  
DUPLICATE FEE PAID THROUGH PAY.GOV**

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ATTORNEY NAME: \_\_\_\_\_

ATTORNEY ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dear Clerk of Court,

On \_\_\_\_\_:

I electronically filed a Petition for Admission to Practice through Pay.Gov and, during the filing process, paid the same fee twice or paid the fee when none was due.

I electronically filed a request for a Certificate of Good Standing through Pay.Gov and, during the filing process, paid the same fee twice or paid the fee when none was due.

I hereby request a refund of my erroneous or duplicate fee in the amount of  
\$ \_\_\_\_\_, receipt number \_\_\_\_\_.

/s/ \_\_\_\_\_