

Name: WILLIAM H. COLLIER JR.

CDC No: 5.D.C.C. 76500

Address: P.O. BOX 208

INDIAN SPRINGS, NV, 89070

RECEIVED

MAR 17 2011

FILED

MAR 17 2011

CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
BY [Signature]

CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
BY [Signature]
DEPUTY CLERK

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
FRESNO DIVISION

William H. Collier Jr.

Plaintiff/Petitioner,

vs.

J. DREHER, ET AL,

Defendants/Respondent.

CASE NUMBER: 1:11-cv-00270-6 BC (pc)

APPLICATION TO PROCEED
IN FORMA PAUPERIS
BY A PRISONER

I, William H. Collier Jr., declare that I am the plaintiff in the above-entitled proceeding; that, in support of my request to proceed without prepayment of fees under 28 U.S.C. section 1915, I declare that I am unable to pay the fees for these proceedings or give security therefor and that I am entitled to the relief sought in the complaint.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "no" DO NOT USE THIS FORM)

State the place of your incarceration. S.D.C.C. Indian Springs, NV

2. Are you currently employed (includes prison employment)? ☐ Yes ☒ No

a. If the answer is "yes" state the amount of your pay. _____

b. If the answer is "no" state the date of your last employment, the amount of your take-home salary or wages and pay period, and the name and address of your last employer.

UNICOR IN ATWATER PENITENTIARY #100120

3. Have you received any money from the following sources over the last twelve months?

a. Business, profession, or other self-employment: ☐ Yes ☒ No

b. Rent payments, interest or dividends: ☐ Yes ☒ No

- c. Pensions, annuities or life insurance payments: ☐ Yes ☒ No
- d. Disability or workers compensation payments: ☐ Yes ☒ No
- e.. Gifts or inheritances: ☐ Yes ☒ No
- f. Any other sources: ☐ Yes ☒ No

If the answer to any of the above is "yes," describe by that item each source of money. Also state the amount received **and** what you expect you will continue to receive (attach an additional sheet if necessary).

4. Do you have cash (includes balance of checking or savings accounts)? ☐ Yes ☒ No

If "yes" state the total amount: _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? ☐ Yes ☒ No

If "yes" describe the property and state its value: _____

6. Do you have any other assets? ☐ Yes ☒ No

If "yes," list the asset(s) and state the value of each asset listed:

7. List all persons dependent on you for support, stating your relationship to each person listed and how much you contribute to their support. *N/A*

IMPORTANT: This form must be dated and signed below in order for the court to consider your application.

I hereby authorize the agency having custody of me to collect from my trust account and forward to the Clerk of the United States District Court payments in accordance with 28 U.S.C. section 1915(b)(2).

3-8-2011

DATE

William H. Belle Jr.

SIGNATURE OF APPLICANT

NOTE: Within sixty days from the date of this application you must forward to the court a certified copy of your prison trust account statement showing transactions for the past six months.

(Revised 01/2008)

SDCC

FINANCIAL CERTIFICATE

I request that an authorized officer of the institution in which I am confined, or other designated entity, such as Inmate Services for the Nevada Department of Prisons (NDOC), complete the below Financial Certificate.

I understand that:

(1) if I commence a petition for writ of habeas corpus in federal court pursuant to 28 U.S.C. § 2254, the filing fee is \$5.00, and that such fee will have to be paid by me if the current account balance (line #1 below), or the average account balance (line #2 below), or the average deposits to my account (line #3), whichever is greater, is \$20.00 or more;

(2) if I commence a civil rights action in federal court pursuant to 42 U.S.C. § 1983, the filing fee is \$350.00, which I must pay in full; and

(a) if my current account balance (line #1 below) is \$350.00 or more, I will not qualify for *in forma pauperis* status and I must pay the full filing fee of \$350.00 before I will be allowed to proceed with the action;

(b) if I do **NOT** have \$350.00 in my account as reflected on line #1 below, before I will be allowed to proceed with an action I will be required to pay 20% of my average monthly balance (line #2 below), or the average monthly deposits to my account (line #3 below), whichever is greater, and thereafter I must pay installments of 20% of the preceding month's deposits to my account in months that my account balance exceeds \$10.00 (if I am in the custody of the NDOC, I hereby authorize the NDOC to make such deductions from deposits to my account, and I further understand that if I have a prison job, then the 20% of my paycheck that is guaranteed to me as spendable money will be sent to the court for payment of the filing fee); and

(c) I must continue to make installment payments until the \$350.00 filing fee is fully paid, without regard to whether my action is closed or my release from confinement.

Type of action (check one): ☐ civil rights

☒ habeas corpus

William H. Collier Jr.
INMATE NAME (printed)

William H. Collier Jr. 76560
SIGNATURE & PRISON NUMBER

1. CURRENT ACCOUNT BALANCE

1.04

2. AVERAGE MONTHLY BALANCE*

50.43 ✓

3. AVERAGE MONTHLY DEPOSITS*

10.09 ✓

4. FILING FEE (based on #1, #2 or #3, whichever is greater)

10.09 ✓

* for the past six (6) months, from all sources, including amount in any savings account that is in excess of minimum amount that must be maintained

I hereby certify that as of this date, the above financial information is accurate for the above named inmate.

(Please sign in ink in a
(color other than black.)

01/11/2011
DATE

[Signature]
AUTHORIZED OFFICER

AAH

TITLE

1/11/11
14:36:24

Nevada Department of Corrections
INMATE FINANCIAL CERTIFICATE
2010/07/12 THRU 2011/01/11

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IBG660

WILLIAM COLLIER 76500

START DATE	END DATE	TOTAL DAILY BALANCES	NUMBER OF DAYS	AVERAGE MONTHLY BALANCE
2010/07/12	2010/08/11	3,706.12	30	123.54
2010/08/12	2010/09/11	1,690.91	31	54.55
2010/09/12	2010/10/11	745.62	30	24.85
2010/10/12	2010/11/11	2,757.85	31	88.96
2010/11/12	2010/12/11	288.80	30	9.63
2010/12/12	2011/01/11	32.24	31	1.04

START DATE	END DATE	TOTAL DEPOSITS	NUMBER OF DEPOSITS	AVERAGE MONTHLY DEPOSITS
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CURRENT ACCOUNT BALANCE 2011/01/11 1.04

AVERAGE MONTHLY BALANCE

50.43

AVERAGE MONTHLY DEPOSITS

.00

AVERAGE TOTAL MONTHLY DEPOSIT

.00

0.00

50.43x

0.20=

10.09*