

FILED

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA

APR 15 2015

James Tobias
Petitioner

vs.

APPLICATION TO PROCEED
IN FORMA PAUPERIS
BY A PRISONER

CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
DEPUTY CLERK

Kayla Bodine
Respondent(s)

CASE NUMBER:

1:15 CV - 00574 - SAB

I, James Tobias, declare that I am the petitioner in the above-entitled proceeding; that, in support of my request to proceed without prepayment of fees under 28 U.S.C. § 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 petition.

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)

If "Yes" state the place of your incarceration.

Correctional Training Facility at
Soledad, California

Have the institution fill out the Certificate portion of this application.

2. Are you currently employed? 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.

3. In the past twelve months have you received any money from any of the following sources?

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 and state the amount received and what you expect you will continue to receive. Please attach an additional sheet if necessary.

4. Do you have cash or 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 the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support. N/A

I declare under penalty of perjury that the above information is true and correct.

X 04-01-15
DATE

[Signature]
SIGNATURE OF APPLICANT

CERTIFICATE

(To be completed by the institution of incarceration)

I certify that the applicant named herein has the sum of \$ _____ on account to his/her credit at _____ (name of institution). I further certify that during the past six months the applicant's average monthly balance was \$ _____. I further certify that during the past six months the average of monthly deposits to the applicant's account was \$ _____.

DATE

SIGNATURE OF AUTHORIZED OFFICER

Case Number: _____

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached herto is a true and correct copy of
the prisoner's trust account statement showing trasactions of

James Tobias AP2376 for the last six months at

(prisoner name)

CORRECTIONAL TRAINING FACILITY where (s)he is confined.

(name of institution)

I further certify that the average deposits each month to this
prisoner's account for the most recent 6-month period were: \$ \$20.00
and the average balance in the prisoner's account each month for
the most recent 6-month period was: \$0.65

Dated: 4/6/2015

R. Espinoza

Account Clerk II

Department of Correctlons
Correctional Training Facility
P.O. Box 686 Accounting
Soledad, CA 93960



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE. R. Espinoza
ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS
BY R. Espinoza ACTV
TRUST OFFICE

Institution: CTF

Inmate Statement Report

CDCR#	Inmate/Group Name	Institution	Unit	Cell/Bed
AP2376	TOBIAS, JAMES	CTF	B WH B2	203203

Current Available Balance: \$0.00

Transaction List

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
10/01/2014	CTF	BEGINNING BALANCE				\$0.00
01/02/2015	CTF	JPAY	0000000041624807		\$120.00	\$120.00
01/04/2015	CTF	SALES	16		(\$120.00)	\$0.00

Encumbrance List

Encumbrance Type	Transaction Date	Amount
No information was found for the given criteria.		

Obligation List

Obligation Type	Court Case#	Original Owed Balance	Sum of Tx for Date Range for Oblg	Current Balance
No information was found for the given criteria.				

Restitution List

Restitution	Court Case#	Status	Original Owed Balance	Interest Accrued	Sum of Tx for Date Range for Oblg	Current Balance
No information was found for the given criteria.						

Department of Corrections
 Correctional Training Facility
 P.O. Box 686 Accounting
 Soledad, CA 93960



THE WITHIN INSTRUMENT IS A CORRECT COPY OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE.
 ATTEST: *R. Espinoza*
 CALIFORNIA DEPARTMENT OF CORRECTIONS
 BY *R. Espinoza* 4-6-15
 TRUST OFFICE