

Name: William J Gradford
CDC No: #1403174
Address: 200 E. Hackett Rd
Modesto CA 95358

FILED
APR 14 2017
CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
BY [Signature]
DEPUTY CLERK

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA

CASE NUMBER: 1:17-cv-528 SAB
PC

Plaintiff/Petitioner, William J Gradford

v.

APPLICATION TO PROCEED
IN FORMA PAUPERIS
BY A PRISONER

Defendants/Respondent.
Deputy Mejia, Deputy Yousef Poor

I, William J Gradford 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. Stanislaus Public Safety Center

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

a. If the answer is "yes" state the amount of your pay. N/A

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.
permanently disable

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, state the amount received, as well as what you expect you will continue to receive (attach an additional sheet if necessary). \$73.00 monthly (SSI)

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

If "yes" state the total amount: N/A

- 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: N/A

- 6. Do you have any other assets? Yes No

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

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

None

This form must be dated and signed below 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. § 1915(b)(2).

3-23-17
DATE

William Gradwohl
SIGNATURE OF APPLICANT

CERTIFICATE

(To be completed by the institution of incarceration)

I certify that the applicant named herein has the sum of \$ 117.43 on account to his/her credit at PUBLIC SAFETY CENTER WEST (name of institution). I further certify that during the past six months the applicant's average monthly balance was \$ VARIES. I further certify that during the past six months the average monthly deposits to the applicants account was \$ 321.68.

(Please attach a certified copy of the applicant's trust account statement showing transactions for the past six months.)

4/5/17
DATE

Sgt M. 11619
SIGNATURE OF AUTHORIZED OFFICER

Account Receipt

Apr 05, 2017
11:54 AM

Stanislaus County Sheriff's Department
Facility: SC Shift: 1

Page: 1 of 2

Booking No: 1403174

GRADFORD, WILLIAM JAMES

ID Number 163811

Date	Transaction Shift	Type	Amount	Receipt Number	Tran Description
11/22/2016	2	BOOKED	\$ 0.00	3452270	
11/23/2016	2	TRANFRM	\$ 0.00	3452729	Inmate with booking number :1403174 is being transferred.
11/23/2016	2	TRANTO	\$ 0.00	3452741	Inmate with booking number :1403174 is transferred to SC.
12/01/2016	1	DEPOSIT	\$ 195.05	3455530	COM\$ED\$21541593
12/02/2016	2	DEPOSIT	\$ 195.05	3456205	COM\$ED\$21541655
12/02/2016	2	DEPOSIT	\$ 195.05	3456206	COM\$ED\$21541656
12/02/2016	2	DEPOSIT	\$ 195.05	3456207	COM\$ED\$21541657
12/02/2016	2	DEPOSIT	\$ 145.05	3456208	COM\$ED\$21541658
12/03/2016	1	DEPOSIT	\$ 105.05	3456419	COM\$ED\$21603722
12/07/2016	1	MEDCOPY	\$3.00-	3458270	Sick Call
12/08/2016	1	PHONCRD	\$20.00-	3458659	PHONE CARD
12/08/2016	1	COMMSAL	\$100.90-	3458660	COMMISSARY SALE
12/15/2016	1	COMMSAL	\$100.40-	3461412	COMMISSARY SALE
12/22/2016	1	PHONCRD	\$10.00-	3464200	PHONE CARD
12/22/2016	1	COMMSAL	\$94.40-	3464201	COMMISSARY SALE
12/29/2016	1	PHONCRD	\$20.00-	3466703	PHONE CARD
12/29/2016	1	COMMSAL	\$93.35-	3466704	COMMISSARY SALE
01/04/2017	1	DEPOSIT	\$ 115.05	3469013	COM\$ED\$21864066
01/05/2017	1	COMMSAL	\$87.40-	3469478	COMMISSARY SALE
01/12/2017	1	COMMSAL	\$99.90-	3472245	COMMISSARY SALE
01/19/2017	1	MEDCOPY	\$3.00-	3474941	Sick Call
01/19/2017	1	MEDCOPY	\$3.00-	3474942	Sick Call
01/19/2017	1	COMMSAL	\$92.55-	3475232	COMMISSARY SALE
01/24/2017	1	MEDCOPY	\$3.00-	3477587	Sick Call
01/26/2017	1	PHONCRD	\$10.00-	3478583	PHONE CARD
01/26/2017	1	COMMSAL	\$86.15-	3478584	COMMISSARY SALE
02/02/2017	1	COMMSAL	\$92.10-	3481405	COMMISSARY SALE
02/03/2017	2	DEPOSIT	\$ 150.00	3482102	COM\$ED\$22164634
02/09/2017	1	COMMSAL	\$99.55-	3484558	COMMISSARY SALE
02/16/2017	1	COMMSAL	\$93.70-	3487635	COMMISSARY SALE
02/23/2017	1	COMMSAL	\$79.25-	3490592	COMMISSARY SALE
03/02/2017	1	COMMSAL	\$100.15-	3493705	COMMISSARY SALE
03/02/2017	1	DEPOSIT	\$ 145.05	3493769	COM\$ED\$22461662
03/09/2017	1	COMMSAL	\$89.20-	3496774	COMMISSARY SALE
03/10/2017	1	MEDCOPY	\$3.00-	3497353	Sick Call
03/10/2017	1	MEDCOPY	\$3.00-	3497354	Sick Call
03/16/2017	1	COMMSAL	\$34.15-	3499759	COMMISSARY SALE
03/20/2017	2	DEPOSIT	\$ 18.05	3501578	COM\$ED\$22768552
03/23/2017	1	PHONCRD	\$5.00-	3502830	PHONE CARD
03/23/2017	1	COMMSAL	\$32.30-	3502831	COMMISSARY SALE
04/02/2017	2	DEPOSIT	\$ 150.05	3506842	COM\$ED\$23013635

Account Receipt

Apr 05, 2017
11:54 AM

Stanislaus County Sheriff's Department

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Facility: SC

Shift: 1

Booking No: 1403174

GRADFORD, WILLIAM JAMES

ID Number 163811

Date	Transaction	Shift	Type	Amount	Receipt Number	Tran Description
04/04/2017		1	PAYOUT	\$32.62-	3507429	Crt Ordered Pymts - Mar \$163.10 X 20% + \$32.62

Balance = \$ 117.43

I have reviewed the above transactions and acknowledge that they are correct

Signature _____