INFORMATION TO PRISONERS SEEKING LEAVE TO PROCEED WITH A CIVIL ACTION IN FEDERAL COURT IN FORMA PAUPERIS PURSUANT TO 28 U.S.C. § 1915

In accordance with 1996 amendments to the *in forma pauperis* statute, **AS A**PRISONER YOU WILL BE OBLIGATED TO PAY THE FULL FILING FEE OF
\$350.00 FOR A CIVIL RIGHTS ACTION, \$5.00 FOR A HABEAS CORPUS
PETITION, OR \$505.00 FOR AN APPEAL. If you are not afforded *in forma pauperis* status in a Civil Rights Action, you will be required to pay the \$350.00 filing fee <u>plus</u> a \$50.00 administrative fee for a total of \$400.00.

If you have the money to pay the full filing fee, send a cashier's check or money order made payable to the U.S. District Court with your complaint, petition, or notice of appeal.

If you do not have enough money to pay the full filing fee when your action is filed, you can file the action without prepaying the filing fee. The court will order the facility where you are held in custody to collect the filing fee from your prison or jail trust account. EACH MONTH YOU WILL OWE 20 PERCENT OF YOUR PRECEDING MONTH'S INCOME TOWARD THE BALANCE UNTIL THE FILING FEE IS PAID IN FULL. The facility will forward payments to the court any time the amount in the account exceeds \$10.00. The balance of the filing fee will be collected even if the action is later dismissed, summary judgment is granted against you, or you fail to prevail at trial.

In order to proceed with an action *in forma pauperis*, you must complete the attached form and return it to the court with your complaint, habeas corpus petition, or appeal. You must attach to the form a certified copy of your prison or jail account statement for the last six months. If you submit an incomplete form or do not submit a prison or jail account statement with the form, your request to proceed *in forma pauperis* will be denied.

The court is required to screen your complaint regardless of the amount of filing fee paid and will dismiss the complaint if:

- 1. Your allegation of poverty is untrue;
- 2. The action is frivolous or malicious;
- 3. Your complaint does not state a claim on which relief can be granted, or
- 4. You sue a defendant for money damages and that defendant is immune from liability for money damages.

If you file more than three actions or appeals while incarcerated that are dismissed as frivolous, malicious, or for failure to state a claim on which relief can be granted, you will be prohibited from bringing any other actions *in forma pauperis* unless you are in imminent danger of serious physical injury.

Doc. 6 Att. 1

CDC	No:		<u>-</u>			
Addr	ess:					
			_			
			S DISTRICT COURT ICT OF CALIFORNIA			
			CASE NUMBER:			
V.		Plaintiff/Petitioner,	APPLICATION TO PROCEED IN FORMA PAUPERIS BY A PRISONER			
		Defendants/Respondent/				
that 1	I am un f sought	able to pay the fees for these proceeding in the complaint.	re that I am the plaintiff in the above-entitled proceeding; repayment of fees under 28 U.S.C. section 1915, I declare ngs or give security therefor and that I am entitled to the following questions under penalty of perjury:			
1.	Are y	you currently incarcerated?Y	es No (If "no" DO NOT USE THIS FORM)			
	State the place of your incarceration.					
2.	Are you currently employed (includes prison employment)? Yes No					
	a.	If the answer is "yes" state the amount	unt of your pay.			
	b.		of your last employment, the amount of your take-home the name and address of your last employer.			
3.	Have you received any money from the following sources over the last twelve months?					
	a.	Business, profession, or other self-e	employment: Yes No			
	b.	Rent payments, interest or dividend	s:YesNo			

Name:_

	c. Pensions, annuities or life insu	rance payments:	Yes	No			
	d. Disability or workers compens	sation payments:	Yes	No			
	e. Gifts or inheritances:		Yes	No			
	f. Any other sources:		Yes	No			
	If the answer to any of the above is "yant received, as well as what you expect ssary).			•			
4.	Do you have cash (includes balance of checking or savings accounts)? YesNo						
	If "yes" state the total amount:						
5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles other valuable property? Yes No							
	If "yes" describe the property and state	e its value:					
6.	Do you have any other assets?	Yes	No				
	If "yes," list the asset(s) and state the	value of each asset l	isted:				
7.	List all persons dependent on you for how much you contribute to their supp	o each person listed					
	This form must be dated and sign	ed below for the c	ourt to consi	der your applica	tion.		
	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).						
	DATE	SIG	GNATURE O	F APPLICANT	_		
	(To be complete	CERTIFICATE d by the institution of	of incarceratio	n)			
I certi	fy that the applicant named herein has th				- o 4l- o		
applic	ant's average monthly balance was \$	itution). I further cen					
averag	ge monthly deposits to the applicants acc	ount was \$	_•				
(Pleas month	e attach a certified copy of the applicant as.)	's trust account state	ement showing	transactions for the	past six		
DATE	7.	SIGN	IATURE OF A	AUTHORIZED OF	FICER		