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CHIN-LI MOU
4141 Boneso Cir.
San Jose, CA 95134
(408)954-8085

Pro se

ADR

FILED

Clear Form

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RICHARD W. WIEKING
CLERK
U.S. DISTRICT COURT
NO. DIST. OF CA. S.J.

ton

C/RS

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN JOSE DIVISION

C07 05740

RS

CHIN-LI MOU Plaintiff,

vs.

CITY OF SAN JOSE, SAN JOSE
PUBLIC LIBRARY EDUCATION
PARK BRANCH Defendant.

CASE NO.

APPLICATION TO PROCEED
IN FORMA PAUPERIS
(Non-prisoner cases only)

[Signature]

I, CHIN-LI MOU, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received.

2 State Fund Compensation Insurance Fund Gross \$3,500
3 Net \$ 2,500, last paycheck 2005 Jan.
4 _____

5 2. Have you received, within the past twelve (12) months, any money from any of the
6 following sources:

7 a. Business, Profession or Yes ___ No X
8 self employment?

9 b. Income from stocks, bonds, Yes ___ No X
10 or royalties?

11 c. Rent payments? Yes ___ No X

12 d. Pensions, annuities, or Yes ___ No X
13 life insurance payments?

14 e. Federal or State welfare payments, Yes ___ No X
15 Social Security or other govern-
16 ment source?

17 If the answer is "yes" to any of the above, describe each source of money and state the amount
18 received from each.

19 _____
20 _____

21 3. Are you married? Yes ___ No X

22 Spouse's Full Name: _____

23 Spouse's Place of Employment: _____

24 Spouse's Monthly Salary, Wages or Income:

25 Gross \$ _____ Net \$ _____

26 4. a. List amount you contribute to your spouse's support: \$ _____

27 b. List the persons other than your spouse who are dependent upon you for support
28 and indicate how much you contribute toward their support. (NOTE: For minor

1 children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)
2
3

4 5. Do you own or are you buying a home? Yes No

5 Estimated Market Value: \$ 500,000 Amount of Mortgage: \$ 0

6 6. Do you own an automobile? Yes No

7 Make _____ Year _____ Model _____

8 Is it financed? Yes No If so, Total due: \$ _____

9 Monthly Payment: \$ _____

10 7. Do you have a bank account? Yes No (Do not include account numbers.)

11 Name(s) and address(es) of bank: Wellsfargo bank - 1 South Milpitas Blvd,
12 Milpitas 95035, Comerica Bank 1245 S. Winchester Blvd S, J95178

13 Present balance(s): \$ \$150, \$50

14 Do you own any cash? Yes No Amount: \$ 15

15 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
16 market value.) TV - owned since 1988 \$20 Yes No

17 Computer with windows 98 operating system \$100

18 8. What are your monthly expenses?

19 Rent: \$ _____ Utilities: \$35

20 Food: \$ 150 Clothing: \$60

21 Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Account</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

26 9. Do you have any other debts? (List current obligations, indicating amounts and to whom
27 they are payable. Do not include account numbers.)

28 San Jose Reassurance Home Owner Ass. \$240 per month

1 County of Santa Clara property tax \$220 per
2 month

3 10. Does the complaint which you are seeking to file raise claims that have been presented in
4 other lawsuits? Yes ___ No X

5 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in
6 which they were filed.

7 _____
8 _____

9 I declare under the penalty of perjury that the foregoing is true and correct and understand that a
10 false statement herein may result in the dismissal of my claims.

11 Nov 13/2007

12 

13 DATE

14 SIGNATURE OF APPLICANT

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