

Clear Form

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U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIF.

ADR

*Handwritten initials*

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

*Chin-Li Mou*

Plaintiff,

vs.

*West Valley College, et al.*

Defendant.

**C09 01910**

**APPLICATION TO PROCEED  
IN FORMA PAUPERIS**

(Non-prisoner cases only)

JF

RS

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 \_\_\_\_\_  
3 \_\_\_\_\_  
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   
8 self employment?

9 b. Income from stocks, bonds, Yes \_\_\_ No   
10 or royalties?

11 c. Rent payments? Yes \_\_\_ No

12 d. Pensions, annuities, or Yes \_\_\_ No   
13 life insurance payments?

14 e. Federal or State welfare payments, Yes \_\_\_ No   
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

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: \$ 400,000 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: Wells Fargo

12 \_\_\_\_\_

13 Present balance(s): \$ 300

14 Do you own any cash? Yes  No  Amount: \$ 20.00

15 Do you have any other assets? (If "yes," provide a description of each asset and its estimated  
 16 market value.) Yes  No

17 \_\_\_\_\_

18 8. What are your monthly expenses?

19 Rent: \$ 0 Utilities: Paid by ex-husband

20 Food: \$ Paid by ex-husband Clothing: 0

21 Charge Accounts:

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

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.) NO

28 \_\_\_\_\_

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes \_\_\_ No ✓

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

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

5-1-2009



DATE

SIGNATURE OF APPLICANT