

1 KAREN BETH YOUNG  
 2 PO BOX 2335  
 3 SAN JOSE, CALIFORNIA  
 4 95109  
 5 MSKBYOU@AOL.COM  
 6 301-991-1937

Filed

AUG 23 2010

RICHARD W. WIEKING  
 CLERK, U.S. DISTRICT COURT  
 NORTHERN DISTRICT OF CALIFORNIA  
 SAN JOSE

8 UNITED STATES DISTRICT COURT  
 9 NORTHERN DISTRICT OF CALIFORNIA

10 KAREN BETH YOUNG )  
 11 Plaintiff, )  
 12 vs. )  
 13 )  
 14 FACEBOOK, INC. )  
 15 Defendant. )

CASE NO. 10-03579

**APPLICATION TO PROCEED  
 IN FORMA PAUPERIS**

16 I, Karen Beth Young, declare, under penalty of perjury that I am the plaintiff  
 17 in the above entitled case and that the information I offer throughout this application is true and  
 18 correct. I offer this application in support of my request to proceed without being required to  
 19 prepay the full amount of fees, costs or give security. I state that because of my poverty I am  
 20 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:

22 1. Are you presently employed? Yes \_\_\_ No

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

25 Gross: N/A Net: STUDENT LOANS

26 Employer: STUDENT - FINANCIAL AID

28 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 2009 - 8<sup>th</sup> MAR  
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 FOOD STAMPS - 200 MONTH  
20 \_\_\_\_\_

21 3. Are you married? Yes \_\_\_ No

22 Spouse's Full Name: N/A

23 Spouse's Place of Employment: N/A

24 Spouse's Monthly Salary, Wages or Income:

25 Gross \$ N/A Net \$ \_\_\_\_\_

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

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 N/A  
3

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

5 Estimated Market Value: \$ — Amount of Mortgage: \$ —

6 6. Do you own an automobile? Yes  No \_\_\_

7 Make SUBARU Year 2000 Model OUTBACK Station Wagon

8 Is it financed? Yes \_\_\_ No  If so, Total due: \$ 0

9 Monthly Payment: \$ 0

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

11 Name(s) and address(es) of bank: BB & T  
12 MARTINSBURG, WV / FREDERICK, MD.

13 Present balance(s): \$ 250.00

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

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

17 N/A

18 8. What are your monthly expenses?

19 Rent: \$ SEEKING ≈ 300 Utilities: 0 to 100

20 Food: \$ 400 Clothing: 50 to 100

21 Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Account
<u>CREDIT CARDS</u>	\$ <u>75.00</u>	\$ <u>2,000</u>
<u>CREDIT CARDS</u>	\$ <u>75.00</u>	\$ <u>600</u>
<u>TELEPHONE</u>	\$ <u>80.00</u>	\$ <u>MONTHLY</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 STUDENT LOANS ≈ 55,000

1 INSURANCE, CAR, GAS 300-400 MONTH

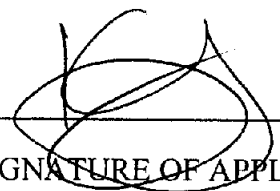
2 10. Does the complaint which you are seeking to file raise claims that have been presented in  
3 other lawsuits? Yes \_\_\_ No ✓

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

6 \_\_\_\_\_  
7 \_\_\_\_\_

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

10 8/23/2010  
11 \_\_\_\_\_  
12 DATE

13 \_\_\_\_\_  
14   
15 \_\_\_\_\_  
16 SIGNATURE OF APPLICANT

17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

# UNITED STATES DISTRICT COURT

for the

Northern District of California

\_\_\_\_\_ )  
 Young )  
 Plaintiff )  
 v. )  
 \_\_\_\_\_ )  
 Facebook, Inc. )  
 Defendant )

Civil Action No. 10-03579

## APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated.* I am being held at: \_\_\_\_\_

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are:

UNEMPLOYED AT THIS TIME.

My gross pay or wages are: \$ 0, and my take-home pay or wages are: \$ 0 per (specify pay period) \_\_\_\_\_.

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

- (a) Business, profession, or other self-employment  Yes  No
- (b) Rent payments, interest, or dividends  Yes  No
- (c) Pension, annuity, or life insurance payments  Yes  No
- (d) Disability, or worker's compensation payments  Yes  No
- (e) Gifts, or inheritances  Yes  No
- (f) Any other sources  Yes  No

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

VA CHECK - MONTHLY ≈ 120.00

GIFTS - HELP WITH BILLS ≈ 1000 - ONE TIME / NON-RECURRING  
EVENT / HOLIDAY MONEY ≈ 2000 - UNKNOWN

4. Amount of money that I have in cash or in a checking or savings account: \$ 250.00 CHECKING,

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (describe the property and its approximate value):

2000 - SUBARU OUTBACK STATION WAGON - FAIR CONDITION

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (describe and provide the amount of the monthly expense):

INSURANCE / GAS / EXPENSES - AUTO - 300 - 400 MONTH  
1) CREDIT CARD - 75.00  
2) CREDIT CARD - 75.00  
TELEPHONE - 80.00  
(FOOD STAMPS - 200 MONTH)  
FOOD - 400 MONTH

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:


N/A

8. Any debts or financial obligations (describe the amounts owed and to whom they are payable):

APPROXIMATELY 55,000 - STUDENT LOANS  
2,000 > CREDIT CARDS  
& 600

Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: 8/23/2010

  
Applicant's signature  
KAREN BERNA YOUNG  
Printed name