

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF INDIANA

[This form is for prisoners who do not pay the filing fee when they file a new case OR a notice of appeal.]

[Put your full name on this line.]

v.

[Put the name of the first person you are suing on this line.]

Case Number _____

[For a new case in this court, leave blank.
The court will assign a case number.]

[The top of this page is the caption. Everything you file in this case must have the same caption. Once you know your case number, it is **VERY IMPORTANT** that you include it on everything you send to the court for this case. **DO NOT** send more than one copy of anything to the court.]

PRISONER MOTION TO PROCEED IN FORMA PAUPERIS

I am a prisoner. I am unable to pre-pay the costs of this case or appeal. I have attached an official copy of my prisoner trust fund account statement showing every transaction for the last six months. I declare **under penalty of perjury** that these statements are true.

Signature

Prisoner Number

Date

OFFICIAL CERTIFICATE OF PRISONER ACCOUNT

I certify that every transaction for the last six months (or _____ months if the prisoner has been here less than six months) is listed on the attached prisoner trust account statement.

Signature of Authorized Officer

Date

Printed Name and Job Title

Name of Facility

[**DO NOT** write in the margins or on the back of any pages. Attach additional pages if necessary.]