

# 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 3:21-cv-873

[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.]