UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

ANTHONY LOPEZ,

Plaintiff,

-against-

J.T. DEACON, ET AL.,

Defendants.

23-CV-7327 (LTS)

ORDER DIRECTING PAYMENT OF FEES OR IFP APPLICATION

LAURA TAYLOR SWAIN, Chief United States District Judge:

Plaintiff, who is currently incarcerated at Elmira Correctional Facility, brings this action *pro se*. Within thirty days of the date of this order, Plaintiff must either pay the \$402.00 in fees that are required to file a civil action in this court or submit a completed request to proceed *in forma pauperis* (IFP), that is, without prepayment of fees.

To proceed with a civil action in this Court, a prisoner must either pay \$402.00 in fees – a \$350.00 filing fee plus a \$52.00 administrative fee – or, to request authorization to proceed without prepayment of fees, submit a signed IFP application and a prisoner authorization. *See* 28 U.S.C. §§ 1914, 1915. If the Court grants a prisoner's IFP application, the Prison Litigation Reform Act requires the Court to collect the \$350.00 filing fee in installments deducted from the prisoner's account. *See* 28 U.S.C. § 1915(b)(1). A prisoner seeking to proceed in this Court without prepayment of fees must therefore authorize the Court to withdraw these payments from his account by filing a "prisoner authorization," which directs the facility where the prisoner is incarcerated to deduct the \$350.00 filing fee from the prisoner's account in installments and to send to the Court certified copies of the prisoner's account statements for the past six months.

¹ The \$52.00 administrative fee for filing a civil action does not apply to persons granted IFP status under 28 U.S.C. § 1915.

See 28 U.S.C. § 1915(a)(2), (b).

Plaintiff submitted the complaint with a prisoner authorization but without a completed IFP application. Within thirty days of the date of this order, Plaintiff must either pay the \$402.00 in fees or submit the attached IFP application. If Plaintiff submits the IFP application, it should be labeled with docket number 23-CV-7327 (LTS).²

No summons shall issue at this time. If Plaintiff complies with this order, the case shall be processed in accordance with the procedures of the Clerk's Office. If Plaintiff fails to comply with this order within the time allowed, the action will be dismissed.

The Court certifies under 28 U.S.C. § 1915(a)(3) that any appeal from this order would not be taken in good faith, and therefore IFP status is denied for the purpose of an appeal. *Cf. Coppedge v. United States*, 369 U.S. 438, 444–45 (1962) (holding that appellant demonstrates good faith when seeking review of a nonfrivolous issue).

SO ORDERED.

Dated: August 31, 2023

New York, New York

/s/ Laura Taylor Swain
LAURA TAYLOR SWAIN
Chief United States District Judge

² Plaintiff is cautioned that if a prisoner files a federal civil action or appeal that is dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, the dismissal is a "strike" under 28 U.S.C. § 1915(g). A prisoner who receives three "strikes" cannot file federal civil actions IFP as a prisoner, unless he is under imminent danger of serious physical injury, and he must pay the filing fees at the time of filing any new action.

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

	Il name of the plaintiff or petitioner applying (each person ust submit a separate application))	CV	(\	`			
-against-		(Provide docket number, if available; if filing this with your complaint, you will not yet have a docket number.)						
(fu	Il name(s) of the defendant(s)/respondent(s))							
	APPLICATION TO PROCEED WITHO	OUT PREPAYING FE	EES OR CO	STS				
an	m a plaintiff/petitioner in this case and declare that I d I believe that I am entitled to the relief requested in occeed in forma pauperis (IFP) (without prepaying fees e:	this action. In support of	this applicatio	on to				
1.	Are you incarcerated?	☐ No (If "No," ;	go to Question	ı 2.)				
	Do you receive any payment from this institution?	☐ Yes ☐ No						
	Monthly amount:							
	If I am a prisoner, see 28 U.S.C. § 1915(h), I have attadirecting the facility where I am incarcerated to ded and to send to the Court certified copies of my account. U.S.C. § 1915(a)(2), (b). I understand that this means	luct the filing fee from my unt statements for the pas	account in ins st six months. S	stallments See 28				
2.	Are you presently employed?	☐ No						
	If "yes," my employer's name and address are:							
	Gross monthly pay or wages:							
	If "no," what was your last date of employment?							
	Gross monthly wages at the time:							
3.	In addition to your income stated above (which you living at the same residence as you received more the following sources? Check all that apply.				•			
	(a) Business, profession, or other self-employment (b) Rent payments, interest, or dividends	☐ Yes ☐ Yes	=	No No				

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	(c) Pension, annuity, or life insurance paymen			Yes			No			
	(d) Disability or worker's compensation payn	nents	Ц	Yes			No			
	(e) Gifts or inheritances			Yes	3	Ш	No			
	(f) Any other public benefits (unemployment, food stamps, veteran's, etc.)	, social security,		Yes	;		No			
	(g) 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.									
	If you answered "No" to all of the questions al	bove, explain how	you a	are pa	aying you	r expe	enses:			
4.	How much money do you have in cash or in a checking, savings, or inmate account?									
5.	Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value:									
6.	Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? If so, describe and provide the amount of the monthly expense:									
7.	List all people who are dependent on you for support, your relationship with each person, and how much you contribute to their support (only provide initials for minors under 18):									
8.	Do you have any debts or financial obligations not described above? If so, describe the amounts owed and to whom they are payable:									
<i>Declaration:</i> I declare under penalty of perjury that the above information is true. I understand that a false statement may result in a dismissal of my claims.										
Da	ted	Signature								
Na	me (Last, First, MI)	Prison Identificat	ion # (if inca	rcerated)					
	City.		·*		7'- 0 '					
Ad	dress City	S	tate		Zip Code	?				
Telephone Number		E-mail Address (i	f availa	able)						