

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

Plaintiff

-vs-

**REQUEST TO PROCEED
IN FORMA PAUPERIS**

Defendant(s)

I, _____, am the plaintiff in the above entitled case. I hereby request to proceed without being required to prepay fees or costs or give security therefore. I state that because of my poverty I am unable to pay the costs of said proceeding or to give security therefore, and I believe I am entitled to redress.

1. If you are presently employed:
 - a) give the name and address of your employer
 - b) state the amount of your earnings per month

2. If you are **NOT PRESENTLY EMPLOYED**:
 - a) state the date of start and termination of your last employment
 - b) state your earnings per month.

YOU MUST ANSWER THIS QUESTION EVEN IF YOU ARE INCARCERATED.

3. Have you received, within the past twelve months, any money from any source? If so, name the source and the amount of money you received.

- a) Are you receiving any public benefits? No Yes, \$ _____
- b) Do you receive any income from any other source? No Yes, \$ _____

4. Do you have any money, including any money in a checking or savings account? If so, how much?

5. Do you own any apartment, house or building, stocks, bonds, notes, automobiles or other property? If the answer is yes, describe the property and state its approximate value.

No Yes, _____

6. List the person(s) that you pay money to support and the amount you pay each month.

7. Do you pay for rent or for a mortgage? If so, how much each month?

8. State any special financial circumstances which the Court should consider.

I understand that the Court shall dismiss this case if I give a false answer to any question in this declaration. In addition, if I give a false answer I will be subject to the penalties for perjury.

I declare under the penalty of perjury that the foregoing is true and correct.

Dated: _____

(signature)

**UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK**

PRISONER AUTHORIZATION

The Prison Litigation Reform Act (“PLRA” or “Act”) requires you to pay the full filing fee when bringing a civil action if you are currently incarcerated or detained in any facility. If you do not have sufficient funds in your prison account at the time your action is filed, the Court must assess and collect payments until the entire filing fee of **\$350** has been paid, **no matter what the outcome of the action.**

* * *

SIGN AND DATE THE FOLLOWING AUTHORIZATION:

I, _____, request and authorize the facility institution holding me in custody to send to the Clerk of the United States District Court for the Eastern District of New York, a certified copy of my prison account statement for the past six months. I further request and authorize the facility holding me in custody to calculate the amounts specified by 28 U.S.C. § 1915(b), to deduct those amounts from my prison trust fund account (or institutional equivalent), and to disburse those amounts to the United States District Court for the Eastern District of New York. This authorization shall apply to any facility into whose custody I may be transferred.

I UNDERSTAND THAT BY SIGNING AND RETURNING THIS NOTICE TO THE COURT, THE ENTIRE COURT FILING FEE OF \$350 WILL BE PAID IN INSTALLMENTS BY AUTOMATIC DEDUCTIONS FROM MY PRISON TRUST FUND ACCOUNT EVEN IF MY CASE IS DISMISSED.

Signature of Plaintiff

Date Signed

N.Y.S.I.D. # _____

Local Prison I.D. # _____

Federal Bureau of Prisons I.D. # _____