

*****IMPORTANT NOTICE*****

**INFORMATION TO PRISONERS SEEKING LEAVE TO
PROCEED WITH A CIVIL RIGHTS ACTION IN FEDERAL COURT
IN FORMA PAUPERIS PURSUANT TO 28 U.S.C. § 1915**

Under the 1996 amendments to the federal *in forma pauperis* (IFP) statute, as a prisoner you will be required to pay the full federal filing fee of \$350.00 for a civil action or \$455.00 for an appeal.

If you have the money to pay the filing fee, you should send a cashier's check or money order to the court with your complaint. If you do not have enough money to pay the full filing fee at the time you submit your complaint, you must submit: (1) a signed Declaration and Application to Proceed *In Forma Pauperis*; (2) a signed Acknowledgment and Authorization; and (3) a certified copy of your inmate trust fund account (or institutional equivalent) for the past six months. You must declare under penalty of perjury the information you provide is correct. If you submit an incomplete form to the court or do not submit a certified copy of your inmate trust fund account (or institutional equivalent), your case will not be permitted to proceed further. The court will forward your Acknowledgment and Authorization to the appropriate agency to calculate the initial partial filing fee. It is no longer necessary for you to obtain a calculation from the institution prior to submitting your action to the court.

You will be required to pay an initial filing fee equal to 20 percent of the average monthly deposits to your prison or jail account for the six months immediately preceding the filing of the lawsuit, or 20 percent of the average monthly balance in your prison or jail account for that same six month period, whichever is greater. By General Order, the court has directed that when the institution having custody of you receives your signed Acknowledgment and Authorization included in your application, it will take the initial partial filing fee (or available funds) out of your prison or jail account immediately and forward the money to the court. You have a right to bring to the court's attention any alleged miscalculations in the assessment of the initial filing fee. After the initial partial filing fee has been paid, you will still owe the balance of the filing fee. Accordingly, each month, you will owe payments of 20 percent of your preceding month's income credited to your account, until the filing fee is paid in full. The institution having custody of you will collect these payments each time the amount in the account exceeds \$10.00 and forward them to the court pursuant to 28 U.S.C. § 1915(b)(2), enacted April 26, 1996.

Regardless, whether some or all of the filing fee has been paid, the court is required to screen your complaint and to dismiss the complaint if (1) your allegation of poverty is untrue; (2) the action is frivolous or malicious; (3) your complaint does not state a claim on which relief can be granted; or (4) you seek monetary damages from a defendant who is immune from such relief.

Finally, if, while you are a prisoner, you file more than three actions or appeals in any federal court in the United States that are dismissed as frivolous or malicious or for failure to state a claim on which relief can be granted, you will be prohibited from bringing any other actions *in forma pauperis* unless you can demonstrate with specific facts you are in imminent danger of serious physical injury.

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON

Plaintiff
vs.
Defendant(s)

NO.

DECLARATION AND APPLICATION
TO PROCEED *IN FORMA PAUPERIS*
BY A PRISONER BRINGING A CIVIL
RIGHTS ACTION PURSUANT TO 42
U.S.C. § 1983*

I, _____, declare I am the plaintiff in the above-entitled proceeding; in support of my request to proceed under 28 U.S.C. § 1915, I declare I am unable to pay the full filing fee or give security for it; and I am entitled to relief. The nature of my action is *briefly* stated as follows:

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

1. Are you currently incarcerated: Yes No (If "No" DO NOT USE THIS FORM)

If "Yes" state the place of your incarceration. _____

Attach a certified copy of your prison trust account statement showing transactions for the past six months.

2. Are you currently employed? Yes No

a. If the answer is "Yes," state the amount of your salary, wages or gratuity per month, and identify your employer.

b. If the answer is "No," state the date of your last employment, the amount of your salary or wages (net and gross) and pay period, and the name and address of your last employer.

***ONLY USE THIS FORM IF YOU ARE BRINGING A CIVIL RIGHTS ACTION. DO NOT USE THIS FORM IF YOU ARE BRINGING A PETITION FOR WRIT OF HABEAS CORPUS.**

3. In the past twelve months have you received any money from any of the following sources?

- | | | | |
|----|------------------------------------------------|------------------------------|-----------------------------|
| a. | Business, profession or other self-employment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. | Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. | Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. | Disability or workers compensation payments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. | Gifts or inheritances | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. | Any other sources | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If the answer to any of the above is "Yes," describe by that item each source of money and state the amount received **and** what you expect you will continue to receive. Please attach an additional sheet if necessary.

4. Do you have **any** cash or do you have any money in a checking or savings account?
(Do not include your prison account funds.)

Yes No

State the total amount: _____

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? Yes No

If "Yes" describe the property and state its value. _____

6. Do you have any other assets? Yes No

If "Yes" list the asset(s) and state the value of each asset listed.

7. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

I declare under penalty of perjury under the laws of the United States of America that the above information is true and correct.

Executed on: _____

DATE

SIGNATURE OF APPLICANT

CAUSE NO. _____

ACKNOWLEDGMENT AND AUTHORIZATION

By choosing to bring a civil rights action, I acknowledge I am responsible for payment of the full \$350.00 filing fee under 28 U.S.C. §1915. I authorize the agency having custody of me to collect from my account and forward to the Clerk of the United States District Court the initial partial filing fee calculated under the Certification and Calculation section and payments pursuant to 28 U.S.C. § 1915(b). I understand I am required to make monthly payments of twenty (20) percent of my preceding month's income credited to my account and the agency having custody of me will forward funds to the Clerk of the United States District Court each time the amount in the account exceeds ten (\$10.00) dollars until the filing fee is paid in full.

DATE

SIGNATURE OF APPLICANT

COMMITTED NAME OF APPLICANT

INMATE #

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON

v.

Plaintiff,

Defendant(s).

WRITTEN CONSENT FOR
PAYMENT OF COSTS FROM ANY
RECOVERY UNDER LOCAL RULE
CR 3(b)

I, _____, hereby

consent that any recovery in damages that I may receive in the above-captioned cause may be reduced, if so directed by the court, in such an amount as is necessary for payment of the unpaid fees and costs which are taxed against me in the course of this litigation.

DATED this _____ day of _____, 199_____.

Signature of Plaintiff