UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF GEORGIA

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Plaintiff/Petitioner,

v.

AFFIDAVIT IN SUPPORT OF REQUEST TO PROCEED IN FORMA PAUPERIS; AUTHORIZED WITHDRAWAL FORM; CERTIFIED AFFIDAVIT OF INMATE ACCOUNT STATUS.

Defendant/Respondent.

AFFIDAVIT AND AUTHORIZATION FOR WITHDRAWAL FROM INMATE ACCOUNT

I, ______, being first duly sworn or under penalty of perjury, affirm and say that I am the plaintiff/petitioner in the above-styled action; that in support of my motion to proceed without prepayment of fees or costs or give security therefor pursuant to Title 28 U.S.C.§ 1915 (a)(1), I state that because of my poverty I am unable to pay the costs of said proceeding or to give security therefor.

I further swear or affirm that the responses which I have made to the questions below are true.

- 1. Are you presently employed? Yes () No ()
 - a. If employed, state the amount of your salary or wages per month and give the address of your employer._____
 - b. If you are not currently employed, state the date of your last employment and the amount of salary or wages received.

2. Have you received within the past twelve months any money from any of the following sources? a. Business, profession or self-employment? Yes() No()

- b. Rent. payments. interest or dividends?
- c. Pensions, annuities or life insurance?
- d. Gifts or inheritances?
- e. Any other source?

Yes() No() Yes() No() Yes() No() Yes() No()

If you answered yes to any of the above, describe each source and state the amount received from each._____

3. Do you own any cash, or do you have money in a checking or savings account? (Include funds in prison account.)

Yes () NO () If the answer is yes, state the total value of items owned.

Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property, excluding ordinary household furniture and clothing?
Yes () No () If the answer is yes, describe the property and state is approximate value.

5.	List the persons who are	e dependent upon you fo	r support, state	your relationship t	o each person,
	and indicate how much you contribute toward their support.				

AUTHORIZATION FOR ACCOUNT WITHDRAWAL

I hereby authorize my custodian and his/her designee to withdraw funds from my inmate account and to transmit the same to the Clerk, United States District Court to be applied to the filing fee which I am required to pay in connection with this case. This authorization shall apply to any institution in which I am or may be confined.

Executed this _____, 20 _____,

Signature of Plaintiff/Petitioner

PLAINTIFF/PETITIONER IS REQUIRED TO SUBMIT WITH THIS AFFIDAVIT AND AUTHORIZATION A CERTIFIED COPY OF HIS/HER INMATE ACCOUNT STATEMENT FOR THE SIX MONTH PERIOD IMMEDIATELY PRECEDING THE FILING OF THIS COMPLAINT.

CERTIFICATE

I hereby certify that the plaintiff/petitioner herein has a current balance of \$______in his/her inmate account at the ______Institution. Plaintiff has an average monthly balance for the preceding six months of \$_____, and the average monthly deposits to said account for the preceding six months are \$_____. I further certify that plaintiff has the following assets to his/her credit according to the records of this institution:

Date

Authorized Officer of Institution