Case Number:

UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT

MOTION AND DECLARATION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Short Cose Continu
Short Case Caption:
Filer Name:
Instructions: If you would like to have the court consider waiving the docketing fee for your petition for review or notice of appeal, please complete and file this form within 14 days after the date of docketing of your case.
Complete all questions; if the answer to a question is 0, write in that response. In answering, identify only gross amounts (i.e., amounts before any deductions for taxes or otherwise). If you need more space to answer a question or to explain your answer, attach additional pages as needed. Failure to fully answer the questions may result in a denial of the motion.
DECLARATION
I hereby move for leave to proceed in forma pauperis, pursuant to 28 U.S.C § 1915, in this case and submit the following declaration in support thereof:
I,, am the Petitioner / Appellant in the above-entitled case, and I declare that I am unable to pay the docketing fee for my petition appeal. The issues I intend to present for the court's review are as follows:

2.

1. Pay/Wages	Employer(s) (including self- employment)	Gross Annual Pay/Wage
You		\$
Spouse		\$

Select whether you or your spouse have received income from the below

sources o	ver the past	12 months. If yes, on an attached sheet, identify each source
of money	and the gro	ss amounts you or your spouse (1) have received over the past
12 month	ns and (2) ex	pect to receive in the future.
□ Yes	□ No	Income from real property
□ Yes	\square No	Interest or dividends
□ Yes	\square No	Alimony or child support
□ Yes	\square No	Retirement (including social security, pension, or annuity)
□ Yes	\square No	Disability or worker's compensation
□ Yes	\square No	Public Assistance or welfare (including unemployment)
□ Yes	\square No	Inheritance or life insurance
□ Yes	\square No	Gifts
\square Yes	\square No	Other sources

If yes, you must (1) complete and submit <u>Form 6A</u> (Supplemental In Forma Pauperis Form for Prisoners Authorization) and (2) attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, attach one certified statement of each account.

3. Are you currently incarcerated?

No

Yes

4. Describe and identify the value of any property, holding, or other thing of value owned by you or your spouse that exceeds \$1,000 in current worth.				
5. Identify the names (or initials, if under 18) of all persons who are dependent on you or your spouse for support, their relationship to you, and your contribution to their support.				
6. Identify any debts, financial obligations, or monthly expenses for you and your spouse.				

7. your		ect any major changes to your monthly income or expenses or in pilities during the next 12 months?
	$\Box \mathrm{Yes}$	\square No
If yes	s, describe bel	low.
8. or sa		nt of money you and your spouse have in cash, checking accounts, ts: \$
9. other	Have you er case in this	ever filed a motion for leave to proceed in forma pauperis in any court?
	Yes	
	No	
If yes	s, identify the	docket number(s):
	DEC	CLARATION UNDER PENALTY OF PERJURY
		penalty of perjury under the laws of the United States that my form are true and correct. See 28 U.S.C § 1746.
Date	e:	Signature:
		Name: