

MOTION TO PROCEED *IN FORMA PAUPERIS*
IN A 28 U.S.C. § 2255 ACTION

District Court of the Virgin Islands

_____)	
Plaintiff/Petitioner)	
v.)	Criminal No. _____ / Civil No. _____
_____)	(To be supplied by the Clerk of Court)
Defendant/Respondent)	

While no filing fee is associated with a motion pursuant to 28 U.S.C. § 2255, various costs (such as for an attorney or transcripts) are associated therewith. A petitioner's poverty or indigency status determines his or her responsibility for these other costs.¹ If you do not have the necessary funds for such costs, you may request permission to proceed *in forma pauperis* ("IFP"), in which event you must complete and sign this IFP motion. You must answer **all questions**, sign and date the affidavit, and then **obtain the signature of the appropriate prison official who certifies the prison account statement.**² After the appropriate prison official certifies your prison trust fund account statement(s), **you must attach the prison account statement(s) to this motion** for each prison or jail wherein you were incarcerated during the previous six months.

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

1. *Place of confinement:* _____

I have attached to this document a statement – CERTIFIED BY THE APPROPRIATE INSTITUTIONAL OFFICER – showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

- (a) Business, profession, or other self-employment Yes No
- (b) Rent payments, interest, or dividends Yes No
- (c) Pension, annuity, or life insurance payments Yes No
- (d) Disability, or worker's compensation payments Yes No
- (e) Gifts, or inheritances Yes No
- (f) 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.

3. Amount of money that I have in cash or in a checking or savings account: \$ _____

¹ See Rules Governing § 2255 Proceedings, Rule 3, Advis. Comm.'s Note 1976 and 28 U.S.C. § 753(f) (providing examples including transcript and appeal costs); see also *United States v. Thomas*, 713 F.3d 165, 169 (3d Cir. 2013).

² See 28 U.S.C. § 1915(a)(2).

4. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (describe the property and its approximate value):

5. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses: (describe and provide the amount of the monthly expenses)

6. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

7. Any debts or financial obligations (describe the amounts owed and to whom they are payable):

Declaration: I declare under penalty of perjury that the above information is true and I understand that a false statement may result in a dismissal of my claims.

Date: _____

Movant's signature

Printed name

CERTIFICATION OF PRISONER'S INSTITUTIONAL ACCOUNT BALANCE: An authorized prison official must complete the certification below, AND furnish a certified copy of your institutional account statement showing all deposits, withdrawals, and balances for the prior six-month period, to be filed with this motion.

I certify that the prisoner named herein has the sum of \$_____ on account at _____ correctional facility, where s/he is presently confined.

I further certify that during the prior six-month period, the prisoner's average monthly account balance was \$_____, and that the average amount deposited monthly in the account during the prior six-month period was \$_____, as indicated on the attached CERTIFIED COPY OF THE INSTITUTIONAL ACCOUNT STATEMENT of the prisoner named herein.

Signature of Authorized Prison Official

Date: _____

Title of Authorized Prison Official