

MOTION TO PROCEED *IN FORMA PAUPERIS*
IN A NON-PRISONER CIVIL ACTION

District Court of the Virgin Islands

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

The Clerk will not file a civil complaint **unless** the person seeking relief pays the entire filing fee (\$400) in advance **or** the person moves for and is granted *in forma pauperis* status pursuant to 28 U.S.C. § 1915.

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I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

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

1. I am employed. Yes No

If YES: Employer's name: _____

Employer's address: _____

My gross pay or wages: \$ _____ . _____ weekly biweekly monthly

My net pay or wages: \$ _____ . _____ weekly biweekly monthly

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 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| (b) | Rent payments, interest, or dividends | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| (c) | Pension, annuity, or life insurance payments | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| (d) | Disability, or worker's 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 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: \$ _____

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 understand that a false statement may result in a dismissal of my claims.

Date: _____

Movant's signature

Printed name