FORM 6A. Supplemental in Forma Pauperis Form for Prisoners

## SUPPLEMENTAL IN FORMA PAUPERIS FORM FOR PRISONERS

## **AUTHORIZATION FORM**

I,\_\_\_\_\_, request and authorize the agency holding me in custody, to send to the Clerk of the United States Court of Appeals for the Federal Circuit a certified copy of the statement for the past six months of my trust fund account (or institutional equivalent) at the institution where I am incarcerated. I further request and authorize the agency holding me in custody to calculate and disburse funds from my trust fund account (or institutional equivalent) in the amounts specified by 28 U.S.C. § 1915(b). This authorization is furnished in connection with an appeal, and I understand that the total appellate filing fees for which I am obligated are \$450 or \$455. I also understand that these fees will be debited from my account regardless of the outcome of my appeal. This authorization shall apply to any other agency into whose custody I may be transferred.

Date

Petitioner's Signature

You must sign and date above. You must also complete the following Disclosure and sign and date the Declaration Under Penalty of Perjury below.

## DISCLOSURE OF PRIOR FEDERAL ACTIONS

If you are presently incarcerated, have you ever before brought an action or appeal in a federal court while you were incarcerated or detained? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, how many times? \_\_\_\_\_

Were any of the actions or appeals dismissed because they were frivolous, malicious, or failed to state a claim upon which relief may be granted? \_\_\_\_\_ Yes \_\_\_\_\_ No

If so, how many of them?

## DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury, under the laws of the United States, that the foregoing is true and correct.

Date

Petitioner's Signature

cc: