

**Appendix 60.7B. (Rule 60.7) Motion To Proceed In Forma Pauperis on Appeals/Writs**

**NUMBER: \_\_\_\_\_ SECTION/DIVISION: \_\_\_\_\_**

**\_\_\_\_\_ JUDICIAL DISTRICT COURT**

**VERSUS**

**PARISH OF \_\_\_\_\_**

**STATE OF LOUISIANA**

**APPELLATE PAUPER MOTION**

**NOW INTO COURT COMES \_\_\_\_\_**, Appellant in the above-styled cause and pursuant to the provisions of C.C.P. art. 5181 et seq., respectfully moves to proceed in forma pauperis without prepayment of fees, costs, or security given therefor. In accordance with LSA-R.S. 15:1186 et seq., the Appellant shall be required, when funds exist, to pay an initial partial filing fee of \$\_\_\_\_\_ or 20% of the average monthly deposits up to a maximum of \$\_\_\_\_\_, and thereafter prison officials shall be required to forward monthly payments of 20% of the preceding month's income credited to the Appellant's inmate account until the entire filing fee and record preparation fees are paid. Appellant hereby authorizes the Department of Corrections to withhold and forward to the Clerk of Court the initial and subsequent monthly payments.

**Date: \_\_\_\_\_**

\_\_\_\_\_  
**Signature of Appellant and D.O.C. Number**

\_\_\_\_\_  
**Name of Facility Where Currently Housed**

\_\_\_\_\_  
**Address of Facility**

**AFFIDAVIT IN SUPPORT OF REQUEST TO PROCEED IN FORMA PAUPERIS**

I, \_\_\_\_\_, declare that I am the Appellant in the above entitled case; that in support of my motion to proceed without being required to prepay fees, costs, or give security therefor, I state that because of my poverty that I am unable to pay the costs of said proceeding or to give security therefor; that I believe I am entitled to redress.

I further declare that the responses that I have made to questions and instructions below are true.

1. Are you presently employed? Yes ( ) No ( )

a. If the answer is yes, state the amount of your salary or wages per month, and give the name and address of your employer.

b. If the answer is no, state the date of last employment and the amount of the salary and wages per month which you have received.

2. Have you received within the past twelve months any money from any of the following sources?

a. Business, profession, or form of self employment (hobby craft sales included)? Yes ( ) No ( )

b. Rent payments, interest or dividends? Yes ( ) No ( )

c. Pensions, annuities or life insurance payments? Yes ( ) No ( )

d. Gifts or inheritances? Yes ( ) No ( )

e. Any other sources? Yes ( ) No ( )

If the answer to any of the above is yes, describe each source of money and state the amount received from each during the past 12 months.

3. Do you own any cash, or do you have money and/or bonds in a checking or savings account? (Include any funds in prison accounts.) Yes ( ) No ( ). If the answer is yes, state the total value of items owned.

Prison Drawing Account: \$

Prison Savings Account: \$

a. Cash: \$

b. Bonds: \$

c. Other(s) (specify): \_\_\_\_\_

4. Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishing and clothing)? Yes ( ) No ( )

If the answer is yes, describe the property and state its approximate value.

5. List the persons who are dependent upon you for support, state your relationship to those persons, indicate how much you contribute toward their support.

I declare under penalty of perjury that the foregoing is true and correct.

I understand that a false statement or answer to any question in this affidavit will subject me to penalties for perjury and/or dismissal of my suit. I authorize the Department of Corrections to make payments from my account(s) in accordance with law.

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Appellant and D.O.C. Number**

**STATE OF LOUISIANA**  
**PARISH OF** \_\_\_\_\_

\_\_\_\_\_, being first duly sworn and under oath presents that he/she has read, signed, and subscribed to the above and states that the information therein is true and correct.

\_\_\_\_\_  
**Appellant's Signature**

\_\_\_\_\_  
**Appellant's D.O.C. Number**

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
**Notary Public or other person authorized to administer oaths**

\_\_\_\_\_  
**Title and Identification Number**

### **THIRD PARTY AFFIDAVIT**

**STATE OF LOUISIANA**  
**PARISH OF** \_\_\_\_\_

\_\_\_\_\_, being first duly sworn and under oath, did depose and say that he/she is not attorney or Appellant; that he/she knows Appellant and knows his/her financial condition, and believes that he/she is unable to pay the costs of court in advance, or as they accrue, or to furnish security therefor.

\_\_\_\_\_  
**Signature of Affiant**

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
**Notary Public or other person authorized to administer oaths**

\_\_\_\_\_  
**Title and Identification Number**

**STATEMENT OF ACCOUNT**  
**(Certified Institutional Equivalent)**

I hereby certify that \_\_\_\_\_, D.O.C. number \_\_\_\_\_, the Appellant herein, has the following sums of money on account to his/her credit at \_\_\_\_\_, institution where he/she is confined:

Prison Drawing Account: \$

Prison Savings Account: \$

A. Cash: \$

B. Bonds: \$

I further certify that the average monthly deposits for the preceding six months is \$\_\_\_\_\_. (The average monthly deposits are to be determined by adding the deposits made during a given month and dividing that total by the number of deposits made during that month. This is repeated for each of the six months. The average from each of the six months are to be added together and the total is to be divided by six.)

I further certify that the average monthly balance for the prior six months is \$\_\_\_\_\_. (The average monthly balance is to be determined by adding each day's balance for a given month and dividing that total by the number of days in that month. This is to be repeated for each of the six months. The balances from each of the six months are to be added together and the total is to be divided by six.)

**Date Certified:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Authorized Officer of Institution and  
Title of Institution**

NUMBER: \_\_\_\_\_

SECTION/DIVISION: \_\_\_\_\_

\_\_\_\_ JUDICIAL DISTRICT COURT

VERSUS

PARISH OF \_\_\_\_\_

STATE OF LOUISIANA

### APPELLATE PAUPER ORDER

Considering the Appellant's application to proceed in forma pauperis; that the said application reflects the status of his/her eligibility as of the date of the signing of the form, the law and evidence being in favor thereof:

**IT IS ORDERED** that Appellant's motion to proceed in forma pauperis is granted pursuant to law, for the purpose of the filing and record preparation fee. All Appellants granted in forma pauperis status shall be assessed and required to pay \$\_\_\_\_\_, the initial filing fee and record preparation fee in amounts as set by LSA-R.S. 15:1186, et seq. Appellant shall be required to pay an initial partial filing fee and thereafter, prison officials shall be required to forward monthly payments from the Appellant's inmate account until the entire filing fee is paid.

**IT IS FURTHER ORDERED** that within 20 days from the date of this order or full payment of the trial court costs and preparation fee, whichever is sooner, the Appellant shall pay an initial partial filing fee in the amount of \$\_\_\_\_\_ to the Clerk of Court for the \_\_\_\_ Judicial District Court, or the appeal may be dismissed by the Court of Appeal. It is the Appellant's responsibility to pay the initial partial filing fee of the Court of Appeal and the court preparation fee through the \_\_\_\_\_ Parish Clerk of Court's office for the \_\_\_\_ Judicial District.

**IT IS FURTHER ORDERED** that the Appellant shall make monthly payments of 20% of the preceding month's income credited to his/her prison account. Monthly payments shall be automatically forwarded to the Centralized Inmate Banking Section for the Louisiana Department of Public Safety and Corrections without further action by the Appellant.

**IT IS FURTHER ORDERED** that following payment of the initial partial filing fee, Centralized Inmate Banking Section for the Louisiana Department of Public Safety and Corrections shall forward the monthly payment from the Appellant's prison account to the Clerk of Court each time the amount in Appellant's prison account exceeds \$10 until the appellant filing fee of \$\_\_\_\_\_ and all record preparation fees are paid.

**IT IS FURTHER ORDERED** that a copy of this order shall be mailed to the Appellant and to Centralized Inmate Banking Section of the Louisiana Department of Public Safety and Corrections.

**IT IS FURTHER ORDERED**, that the Louisiana Department of Public Safety and Corrections remit the above-ordered funds to the \_\_\_\_ Judicial District Court, Collections

Department, \_\_\_\_\_, LA \_\_\_\_\_ in accordance with law until all appellate costs are paid.

**SO ORDERED**, this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, in \_\_\_\_\_, Louisiana.

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**JUDGE/COMMISSIONER**  
\_\_\_\_\_**JUDICIAL DISTRICT COURT**