

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF NEW MEXICO

Plaintiff(s),

v.

No.

Defendant(s),

**MOTION TO PROCEED IN FORMA PAUPERIS WITH  
FINANCIAL AFFIDAVIT PURSUANT TO 28 U.S.C. § 1915**

I, \_\_\_\_\_, make under oath the following statement regarding my financial, residential, marital and employment status, and since I am unable to prepay fees and costs in the above-entitled cause, make application to proceed as a pauper in accordance with 28 U.S.C. § 1915:

A. BACKGROUND AND RESIDENCE

1. Full Name: \_\_\_\_\_
2. Age: \_\_\_\_\_ Sex \_\_\_\_\_
3. Present address: \_\_\_\_\_
4. How long at this address: \_\_\_\_\_ Phone No: \_\_\_\_\_
5. Married? \_\_\_\_\_ Single? \_\_\_\_\_ Divorced? \_\_\_\_\_ Separated? \_\_\_\_\_
6. Number of dependents: \_\_\_\_\_
7. Ages of children living with you: \_\_\_\_\_
8. List of relationship of other dependents living with you:  
\_\_\_\_\_
9. List any dependents in items 7 and 8 depending on you for support:  
\_\_\_\_\_

B. EMPLOYMENT AND INCOME

1. Are you now employed?\_\_\_\_\_ Are you self-employed?\_\_\_\_\_
2. Name and address of employer:\_\_\_\_\_
3. Position:\_\_\_\_\_ Salary per month:\$\_\_\_\_\_
4. If self-employed, nature of business:\_\_\_\_\_
5. Income previous month from self-employment:\_\_\_\_\_
6. If unemployed, how long since last job or self-employment:\_\_\_\_\_
7. Any other income such as disability pay, workmen's compensation, social security, pension, interests, note and loan repayments, dividends, trust funds, unemployment compensation?\_\_\_\_\_
8. If so, indicate source and amount per month: \$\_\_\_\_\_
9. Total monthly net income: \$\_\_\_\_\_

C. ASSETS

1. Do you own any real estate? Yes\_\_\_\_\_ No\_\_\_\_\_
  - a. Description\_\_\_\_\_
  - b. Location\_\_\_\_\_
  - c. Estimated present value: \$\_\_\_\_\_
  - d. Estimated outstanding mortgages or contracts on property: \$\_\_\_\_\_
  - e. Payments per month: \$\_\_\_\_\_
2. Do you own any automobiles?
  - a. Make\_\_\_\_\_ Model\_\_\_\_\_ Year\_\_\_\_\_
  - b. Present value: \$\_\_\_\_\_ Total amount owed \$\_\_\_\_\_
  - c. Monthly payments: \$\_\_\_\_\_



\_\_\_\_\_  
Signature of Applicant/Affiant

SUBSCRIBED AND SWORN to before me this \_\_\_\_ day of \_\_\_\_\_,  
200\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:

\_\_\_\_\_