UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT

SUPPLEMENTAL IN FORMA PAUPERIS FORM FOR PRISONERS AUTHORIZATION FORM

Case Number:

Short Case Caption:

I request and authorize the agency holding mein 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 fee for which I am obligated is \$600 or \$605.

I also understand that these fees will be debited from my account regardless of the outcome of my appeal. This authorization applies to any other agency into whose custody I may be transferred.

Date: _____

Signature:

Name:

DISCLOSURE OF PRIOR FEDERAL ACTIONS

1. Have you ever before brought an action or appeal in a federal court while you were incarcerated or detained? □ Yes □ No

If yes, how many times? _____

2. 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?

 \Box Yes \Box No

If yes, how many of them? _____

FORM 6A. Supplemental in Forma Pauperis Form for Prisoners

Form 6A (p. 2) December 2023

3.	Are you in imminent danger of serious physical injury? \Box Yes \Box No	
	If yes, please explain below. Attach additional pages if needed.	

DECLARATION UNDER PENALTY OF PERJURY

I certify the above information and any attached sheets are accurate and complete to the best of my knowledge.

Date: _____

Signature:

Name: