

UNITED STATES DISTRICT COURT

District of COLUMBIA

FILED

OCT 30 2009

Clerk, U.S. District and
Bankruptcy Courts

Nathan Brennan
Plaintiff

V.

Department of Justice
Defendant

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

CASE NUMBER: 09 2054

I, NATHAN BRENNAN declare that I am the (check appropriate box)

☒ petitioner/plaintiff/movant ☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

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

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Part 2)

If "Yes," state the place of your incarceration FCC Yazoo City, Mississippi

Are you employed at the institution? Yes Do you receive any payment from the institution? Yes (appx \$1.82 per mnth)

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☒ Yes ☐ No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer. (List both gross and net salary.)

Approximately \$1.82 per month (Institutional employment)

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

- | | | |
|---|---|--|
| a. Business, profession or other self-employment | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Any other sources | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

RECEIVED

SEP 28 2009

Clerk, U.S. District and
Bankruptcy Courts

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA

CONSENT TO COLLECTION OF FEES FROM TRUST ACCOUNT

Re: NATHAN BRENNAN v. DEPARTMENT OF JUSTICE

Civil Action No. _____

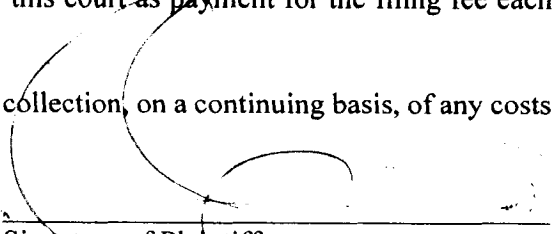
I, NATHAN BRENNAN, Reg. No. 57737-019,
hereby consent for the appropriate prison official to withhold from my prison account and to pay the
U.S. District Court an initial fee of 20 percent of the greater of:

- (a) the average monthly deposits to my account for the six-month period immediately preceding the filing of my complaint; or
- (b) the average monthly balance in my account for the six-month period immediately preceding the filing of my complaint.

I further consent for the appropriate prison officials to collect from my account on a continuing basis each month, an amount equal to 20 percent of each month's income. Each time the amount in the account reaches \$10.00, the Trust Officer shall forward the interim payment to the Clerk's Office, U.S. District Court, until such time as the \$250.00 filing fee is paid in full.

If appropriate, I will execute the institution consent form where I am housed, which will permit the staff to withdraw the amount ordered by this court as payment for the filing fee each month until the \$250.00 filing fee is paid in full.

By executing this document, I also authorize collection, on a continuing basis, of any costs imposed by the District Court.



Signature of Plaintiff

August 5, 2009

Date

09 2054

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General Information

Administrative Hold Indicator: No
 No Power of Attorney: No
 Never Waive NSF Fee: No
 Max Allowed Deduction %: 100
 PIN: 9898
 PAC #: 119741738
 FRP Participation Status: Participating
 Arrived From: ATL
 Transferred To:
 Account Creation Date: 10/23/2006
 Local Account Activation Date: 11/30/2007 3:43:44 AM

Sort Codes:
 Last Account Update: 8/5/2009 7:22:56 AM
 Account Status: Active
 Phone Balance: \$0.11

FRP Plan Information

FRP Plan Type	Expected Amount	Expected Rate
Monthly	\$65.00	0%

Account Balances

Account Balance: \$94.05
 Pre-Release Balance: \$0.00
 Debt Encumbrance: \$0.00
 SPO Encumbrance: \$0.00
 Other Encumbrances: \$0.00
 Outstanding Negotiable Instruments: \$0.00
 Administrative Hold Balance: \$0.00
 Available Balance: \$94.05
 National 6 Months Deposits: \$1,183.76
 National 6 Months Withdrawals: \$1,174.03
 National 6 Months Avg Daily Balance: \$38.39
 Local Max. Balance - Prev. 30 Days: \$100.05
 Average Balance - Prev. 30 Days: \$20.59

Commissary History

Purchases

Validation Period Purchases: \$30.85
YTD Purchases: \$817.63
Last Sales Date: 7/23/2009 1:29:03 PM

SPO Information

SPO's this Month: 0
SPO \$ this Quarter: \$0.00

Spending Limit Info

Spending Limit Override: No
Weekly Revalidation: No
Bi-Weekly Revalidation: No
Spending Limit: \$290.00
Expended Spending Limit: \$30.85
Remaining Spending Limit: \$259.15

Commissary Restrictions

Spending Limit Restrictions

Restricted Spending Limit: \$0.00
Restricted Expended Amount: \$0.00
Restricted Remaining Spending Limit: \$0.00
Restriction Start Date: N/A
Restriction End Date: N/A

Item Restrictions

List Name	List Type	Start Date	End Date	Active
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Comments

Comments: