

UNITED STATES DISTRICT COURT
District of Minnesota

Clear Form

RECEIVED BY MAIL

Christopher Roller

Plaintiff

V.

APPLICATION TO PROCEED WITHOUT PREPAYMENT OF FEES AND AFFIDAVIT

MAY 09 2008

CLERK US DIST COURT MINNEAPOLIS MN

JREF

Defendant

CASE NUMBER: 07-cv-01296-JRT-FLN

I, Christopher Roller declare that I am the (check appropriate box)

[X] 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 [X] No (If "No," go to Part 2)

If "Yes," state the place of your incarceration

Are you employed at the institution? Do you receive any payment from the institution?

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 [X] 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.

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.

last worked 2002 - \$2000/2weeks GE Medical Systems, Sioux Falls, SD

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 [] Yes [X] No
b. Rent payments, interest or dividends [] Yes [X] No
c. Pensions, annuities or life insurance payments [] Yes [X] No
d. Disability or workers compensation payments [X] Yes [] No
e. Gifts or inheritances [] Yes [X] No
f. Any other sources [] Yes [X] No

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If the answer to any of the above is "Yes," describe, in item 7 on the following page, each source of money and state the amount received and what you expect you will continue to receive.

4. Do you have any cash or checking or savings accounts? [X] Yes [] No

If "Yes" state the total amount(s) \$0000



5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? Yes No

If "Yes," describe the property and state its value.

92 Honda Accord - \$1000
2 Computers - \$800

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support. List Minor Children below by initials only and complete attached Reference List for those Minors.

Dillon and Nicole Roller - children. They have Social Security, but I provide additional \$50/month support and \$3000 summer support for tickets/visitation support.

7. Additional information (include source descriptions from item 3):

Social Security Disability - \$1810/month

I, Christopher Roller declare, under penalty of perjury, that the above information is true and correct.

5/7/2008

Date

Christopher A. Roller

Digitally signed by Christopher A. Roller
DN: cn=Christopher A. Roller, c=US,
email=matthew@prisoner@christiaoller.com
Reason: I am the author of this document
Date: 2008.05.07 12:11:09 -0500

Signature of Applicant

CERTIFICATE

(Incarcerated applicants only)

(To be completed by the institution of incarceration)

I, _____, certify that the applicant named herein has the sum of \$ _____ on account to his/her credit at (name of institution) _____. I further certify that the applicant has the following securities to his/her credit: _____

I further certify that in the 6-month period immediately preceding the filing of the complaint/petition/motion or notice of appeal, the average monthly deposits to the prisoner's account was \$ _____, and the average monthly balance in the prisoner's account was \$ _____.

DATE

SIGNATURE OF AUTHORIZED OFFICER



Christopher Roller
13150 Harriet Ave. S. #273
Burnsville, MN 55337

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