

AO 240 (Rev. 07/10) Application to Proceed in District Court Without Prepaying Fees or Costs (Short Form)

FILED
U.S. DISTRICT COURT
EASTERN DISTRICT ARKANSAS

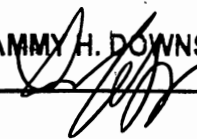
UNITED STATES DISTRICT COURT

SEP 26 2024

for the

Eastern District of Arkansas

TAMMY H. DOWNS, CLERK

By:  DEP CLERK

2024 SEP 26 A 10:10

Lynch

Plaintiff/Petitioner

v.

Civil Action No.

4:24-cv-740-LPR-BBM

Does

Defendant/Respondent

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
(Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

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

1. *If incarcerated.* I am being held at: GCDC (Green)

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are:

My gross pay or wages are: \$ 0, and my take-home pay or wages are: \$ 0 per
(specify pay period) _____.

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

- | | | |
|--|---|--|
| (a) Business, profession, or other self-employment | ☒ Yes | ☐ No |
| (b) Rent payments, interest, or dividends | ☐ Yes | ☒ No |
| (c) Pension, annuity, or life insurance payments | ☐ Yes | ☒ No |
| (d) Disability, or worker's compensation payments | ☐ Yes | ☒ No |
| (e) Gifts, or inheritances | ☐ Yes | ☒ No |
| (f) Any other sources | ☐ Yes | ☒ No |

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

I was employed at abtechcs.com but stopped 6-9-24
I was 1099 contractor. I was getting 1500 a week but
stopped when I went to jail. I still get about 100 \$
every other week from the company if it not it able

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4. Amount of money that I have in cash or in a checking or savings account: \$ 0.5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (describe the property and its approximate value):
NONE

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (describe and provide the amount of the monthly expense): I was paying all cost for my family Housing was 2500 a mo. car payment was 1100 a mo. Utilities was 1500 a mo. My wife now pays all this with help from my family

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

Kirsten Lynch	} all together 8k a mo but none once again that all stopped 6-9-24
B.L	
R.L	
K.L	

8. Any debts or financial obligations (describe the amounts owed and to whom they are payable):

NONE

Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: 9-20-24

Jason M Lynch
Applicant's signature

Jason M Lynch
Printed name

CALCULATION OF INITIAL PAYMENT OF FILING FEE

(To be Completed by the Institution of Incarceration)

PLAINTIFF: JASON LYNCH

ADC NUMBER: 202401692

FEDERAL COURT CASE NUMBER (IF KNOWN): _____

Total deposits for last six (6) months: \$ 450⁰⁰

Average monthly deposit (total deposits divided by 6): \$ 75⁰⁰

Total balances for last six (6) months: \$ 90⁰⁰

Average monthly balance:
(Total balances divided by 6) \$ 15⁰⁰

Current account balance: \$ 31.29

Initial payment of filing fee as of _____: \$ _____

(The greater of the average monthly deposit
Or the average monthly balance x .20)

DATE: 09/20/24 AUTHORIZED OFFICIAL V. Sanchez

(NO FILING FEE SHALL BE IN EXCESS OF
\$350.00 FOR A CIVIL LAWSUIT
OR
\$505.00 FOR AN APPEAL)

I can make a monthly payment,
But don't have the funds to pay all at once

J. N. Z

CERTIFICATE

(Prisoner Accounts Only)

(To be Completed by the Institution of Incarceration)

I certify that the applicant named herein has the sum of \$ 31.29 on account to his/her credit at the GREENE CO. DETENTION CENTER institution where he is confined.

I further certify that the applicant likewise has the following securities to his/her credit according to the records of said institution: GREENE COUNTY DETENTION CENTER

I further certify that during the past six months the applicant's average balance was \$ 15⁰⁰.

09/20/24

Date

J. Sanchez

Signature of Authorized Officer of Institution