

WAWD (Rev. 12/11) Habeas IFP

UNITED STATES DISTRICT COURT
Western District of Washington

Thomas B. Pons
A# [REDACTED]

Petitioner

vs.

ICE FOD, AFOD Mr. White
Department of Homeland
Security

Respondent(s)

Case Number: 2:25-cv-00410-BHS-BAT

**DECLARATION AND APPLICATION
TO PROCEED IN FORMA PAUPERIS
IN A FEDERAL HABEAS ACTION**

**DO NOT use this form if you are bringing a
civil action.**

DECLARATION AND APPLICATION TO PROCEED IN FORMA PAUPERIS

I (print your name) Thomas B Pons declare I am the petitioner in this habeas proceeding; I believe I am entitled to relief; and I am unable to pay the costs of this proceeding or give security thereof.

This action proceeds pursuant to: 28 U.S.C. ☒ §2241 ☐ §2254 ☐ §2255

In support of this application, I answer *all* of the following questions:

1. Are you presently employed?

☐ Yes Total amount of net monthly salary (take home pay) \$ _____

Name and address of employer _____

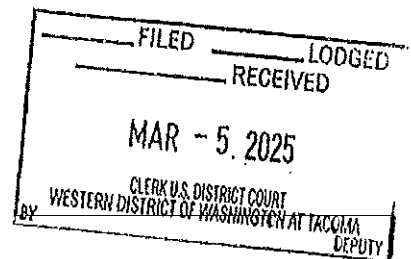
☒ No Date of last employment _____

Amount of net monthly salary when last employed \$ _____

2. For the past twelve months, list the amount of money you have received from any of the following sources.

- a. Business, profession or other self-employment
- b. Income from rent, interest or dividends
- c. Pensions, annuities or life insurance payments
- d. Disability, unemployment, workers compensation or public assistance
- e. Gifts or inheritances
- f. Money received from child support or alimony
- g. Describe any other source of income _____

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____



3. List the amount for each of the following (include prison account funds):

Cash on hand \$ 0 Checking Account \$ 0 Savings Account \$ 0

4. Do you own or have any interest in any real estate, stocks, bonds, notes, retirement plans, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)?
If Yes, describe the property and state its approximate value:

☐ Yes

☒ No

\$

5. Are any persons dependent upon you for support? If Yes, state their relationship to you, and indicate how much you contribute toward their support each month. (Do not include names of minor children.)

☐ Yes

☒ No

\$

6. Describe the types of monthly expenses you incur, such as housing, transportation, utilities, loan payments, or other regular monthly expenses and the amount spent each month.

None, in DHS custody

\$

7. Provide any other information that will help explain why you cannot pay court fees and costs.

In DHS custody over 15+ Months Since November 2023

I declare under penalty of perjury that the foregoing is true and correct.

Feb 25th 2025

Executed on: (Date)

Signature of Applicant

CERTIFICATION

Have the Institution fill out the Certification portion of this application and attach a certified copy of your prison trust account statement showing transactions for the past six months.

I certify that the applicant named herein has the sum of \$ _____ on account to his/her credit at

(Name of Institution) _____

Executed on: (Date)

Signature of Financial Officer

Certified Copy

Of Detainees Account

NW ICE Processing Center

Signature Banks

Date 1-23-25

Resident Account Summary
Thursday, January 23, 2025 @10:20

For All:



PRINS, THOMAS BERT

Date	Transaction Description	Amount	Balance	Owed	Held	Reference