

**UNITED STATES COURT OF APPEALS
FOR THE FOURTH CIRCUIT**

1100 East Main Street, Suite 501
Richmond, Virginia 23219-3517
www.ca4.uscourts.gov

**CONSENT TO COLLECTION OF FEES
FROM TRUST ACCOUNT FOR APPEAL**

No. _____, _____ v. _____
_____ (lower court case no.)

FEE AMOUNT: \$505

PAYABLE TO: Clerk, U.S. District Court

I, _____, # _____, hereby
consent for the appropriate prison officials to assess and, when funds exist, collect
an initial partial filing 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 petition; or

(b) the average monthly balance in my account for the six-month period
immediately preceding the filing of my petition.

I further consent for the appropriate prison officials to collect:

monthly payments of 20 percent of my preceding month's income and
forward the payments to the Clerk, U.S. District Court, each time the
amount in the account exceeds \$10 until the filing fee has been paid in
full.

I understand that by signing this consent I agree to payment of the full filing fee
from my trust account regardless of whether I later choose to dismiss my appeal or
the court decides my appeal before the entire amount has been paid. I understand
that once consent to the collection of fees has been given it cannot be withdrawn.

Signature _____

Date _____