#### PETITION FOR A WRIT OF HABEAS CORPUS UNDER 28 U.S.C. § 2241

#### Instructions

- 1. **Who Should Use This Form**. You should use this form if
  - you are a federal prisoner and you wish to challenge the way your sentence is being carried out (for example, you claim that the Bureau of Prisons miscalculated your sentence or failed to properly award good time credits);
  - you are in federal or state custody because of something other than a judgment of conviction (*for example, you are in pretrial detention or are awaiting extradition*); or
  - you are alleging that you are illegally detained in immigration custody.
- 2. Who Should Not Use This Form. You should not use this form if
  - you are challenging the validity of a federal judgment of conviction and sentence (*these challenges are generally raised in a motion under 28 U.S.C.* § 2255);
  - you are challenging the validity of a state judgment of conviction and sentence (*these challenges are generally raised in a petition under 28 U.S.C. § 2254*); or
  - you are challenging a final order of removal in an immigration case (*these challenges are generally raised in a petition for review directly with a United States Court of Appeals*).
- 3. **Preparing the Petition**. The petition must be typed or neatly written, and you must sign and date it under penalty of perjury. **A false statement may lead to prosecution.**
- 4. **Answer all the questions.** You do not need to cite law. You may submit additional pages if necessary. If you do not fill out the form properly, you will be asked to submit additional or correct information. If you want to submit any legal arguments, you must submit them in a separate memorandum. Be aware that any such memorandum may be subject to page limits set forth in the local rules of the court where you file this petition. If you attach additional pages, number the pages and identify which section of the petition is being continued. All filings must be submitted on paper sized 8<sup>1</sup>/<sub>2</sub> by 11 inches. **Do not use the back of any page.**
- 5. **Supporting Documents**. In addition to your petition, you must send to the court a copy of the decisions you are challenging and a copy of any briefs or administrative remedy forms filed in your case.
- 6. **Required Filing Fee**. You must include the \$5 filing fee required by 28 U.S.C. § 1914(a). If you are unable to pay the filing fee, you must ask the court for permission to proceed in forma pauperis that is, as a person who cannot pay the filing fee by submitting the documents that the court requires.
- 7. **Submitting Documents to the Court**. Mail your petition to the clerk of the United States District Court for the district and division in which you are confined. For a list of districts and divisions, see 28 U.S.C. §§ 81-131.

If you want a file-stamped copy of the petition, you must enclose a copy of the petition and ask the court to file-stamp it and return it to you.

8. **Change of Address**. You must immediately notify the court in writing of any change of address. If you do not, the court may dismiss your case.

	UNITED STATES DISTRICT COURT				
	for the				
	District of				
(name	Petitioner       }         V.       }         Case No.				
	PETITION FOR A WRIT OF HABEAS CORPUS UNDER 28 U.S.C. § 2241				
	Personal Information				
1.	(a) Your full name:				
1.	(a) Four run name. (b) Other names you have used:				
2.	Place of confinement:				
2.	(a) Name of institution:				
	(b) Address:				
	(c) Your identification number:				
3.	Are you currently being held on orders by:				
	□ Federal authorities □ State authorities □ Other - explain:				
4.	Are you currently:				
	A pretrial detainee (waiting for trial on criminal charges)				
	Serving a sentence (incarceration, parole, probation, etc.) after having been convicted of a crime				
	If you are currently serving a sentence, provide:				
	(a) Name and location of court that sentenced you:				
	(b) Docket number of criminal case:				
	(c) Data of sentancing:				
	Being held on an immigration charge				
	Other (explain):				
	Decision or Action You Are Challenging				

5. What are you challenging in this petition:

<sup>1</sup>How your sentence is being carried out, calculated, or credited by prison or parole authorities (for example, revocation or calculation of good time credits)

Provide more information about the decision or action you are challenging: (a) Name and location of the agency or court: (b) Docket number, case number, or opinion number: (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed): (d) Date of the decision or action: Vour Earlier Challenges of the Decision or Action First appeal Did you appeal the decision, file a grievance, or seek an administrative remedy? Yes ONG (a) If "Yes," provide: (1) Name of the authority, agency, or court: (2) Date of filing: (3) Docket number, case number, or opinion number: (4) Result: (5) Date of result: (6) Issues raised: (6) Issues raised: (7) The set of the		
Detainer     Detainer     Detainer     Detainer     Detainer     Detainer     Detainer     Disciplinary proceedings     Disciplinary proceedings     Docket number, case number, or opinion number:     (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):	<b>P</b> retr	ial detention
The validity of your conviction or sentence as imposed (for example, sentence beyond the statutory     maximum or improperly calculated under the sentencing guidelines)     Disciplinary proceedings     Other (explain):	🗖 Imm	igration detention
maximum or improperly calculated under the sentencing guidelines)  Disciplinary proceedings  Other (explain):  Provide more information about the decision or action you are challenging: (a) Name and location of the agency or court: (b) Docket number, case number, or opinion number: (c) Decision or action you are challenging (for disciplinary proceedings. specify the penalties imposed):  (d) Date of the decision or action:  Vour Earlier Challenges of the Decision or Action  First appeal Did you appeal the decision, file a grievance, or seek an administrative remedy?  Yes  (a) If "Yes," provide: (b) Name of the authority, agency, or court: (c) Date of filing: (c) Docket number, case number, or opinion number: (c) Date of filing: (c) Date of result: (c) Date of result: (c) Date service: (c) Date of result: (c) Date service: (c) Dat	Deta	iner
maximum or improperly calculated under the sentencing guidelines) Disciplinary proceedings Other (explain): (a) Disciplinary proceedings about the decision or action you are challenging: (b) Docket number, case number, or opinion number: (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed): (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed): (d) Date of the decision or action: Vour Earlier Challenges of the Decision or Action First appeal Did you appeal the decision, file a grievance, or seek an administrative remedy? (a) If "Yes," provide: (b) Name of the authority, agency, or court: (c) Date of filing: (c) Date of filing: (c) Date of filing: (c) Date of result: (c) Date		validity of your conviction or sentence as imposed (for example, sentence beyond the statutory
□Disciplinary proceedings         □Other (explain):         Provide more information about the decision or action you are challenging:         (a) Name and location of the agency or court:         (b) Docket number, case number, or opinion number:         (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):         (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):         (d) Date of the decision or action:         Your Earlier Challenges of the Decision or Action         First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         □Yes       □No         (a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:		
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<ul> <li>(a) Name and location of the agency or court:</li> <li>(b) Docket number, case number, or opinion number:</li> <li>(c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):</li> <li>(d) Date of the decision or action:</li> <li>Your Earlier Challenges of the Decision or Action</li> </ul> First appeal Did you appeal the decision, file a grievance, or seek an administrative remedy? Ores on No <ul> <li>(a) If "Yes," provide:</li> <li>(b) Date of the authority, agency, or court:</li> <li>(c) Date of filing:</li> <li>(c) Date of filing:</li> <li>(c) Date of result:</li> </ul>		
(b) Docket number, case number, or opinion number:         (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):         (d) Date of the decision or action:         Your Earlier Challenges of the Decision or Action         First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         □Yes       □No         (a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:	Provid	e more information about the decision or action you are challenging:
(b) Docket number, case number, or opinion number:          (c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):         (d) Date of the decision or action:         Your Earlier Challenges of the Decision or Action         First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         □Yes       □No         (a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:         (7) Date of result:         (8) If "substrained in the penalties imposed in the penalties	(a) Na	me and location of the agency or court:
(c) Decision or action you are challenging (for disciplinary proceedings, specify the penalties imposed):  (d) Date of the decision or action:  Your Earlier Challenges of the Decision or Action  First appeal Did you appeal the decision, file a grievance, or seek an administrative remedy?  Yes No (a) If "Yes," provide:  (1) Name of the authority, agency, or court:  (2) Date of filing:  (3) Docket number, case number, or opinion number:  (4) Result:  (5) Date of result:  (6) Issues raised:	(b) Do	cket number, case number, or opinion number:
(d) Date of the decision or action:         Your Earlier Challenges of the Decision or Action         First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         Yes       DNo         (a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:	(c) De	
(d) Date of the decision or action:         Your Earlier Challenges of the Decision or Action         First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         Yes       \Box         (a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:		
(d) Date of the decision or action:         Your Earlier Challenges of the Decision or Action         First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         Yes       \Box         (a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:		
First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         Yes       No         (a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:	(d) Da	
First appeal         Did you appeal the decision, file a grievance, or seek an administrative remedy?         Yes		Your Earlier Challenges of the Decision or Action
Did you appeal the decision, file a grievance, or seek an administrative remedy?          Yes       Image: No         (a) If "Yes," provide:       (1) Name of the authority, agency, or court:         (2) Date of filing:       (3) Docket number, case number, or opinion number:         (4) Result:       (5) Date of result:         (6) Issues raised:       (6) Issues raised:	First a	
Yes No     (a) If "Yes," provide:     (1) Name of the authority, agency, or court:     (2) Date of filing:     (3) Docket number, case number, or opinion number:     (4) Result:     (5) Date of result:     (6) Issues raised:     (7)		
(a) If "Yes," provide:         (1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:	-	
(1) Name of the authority, agency, or court:         (2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:		
(2) Date of filing:         (3) Docket number, case number, or opinion number:         (4) Result:         (5) Date of result:         (6) Issues raised:	(u) II	
<ul> <li>(2) Date of filing:</li> <li>(3) Docket number, case number, or opinion number:</li> <li>(4) Result:</li> <li>(5) Date of result:</li> <li>(6) Issues raised:</li> </ul>		
<ul> <li>(3) Docket number, case number, or opinion number:</li> <li>(4) Result:</li> <li>(5) Date of result:</li> <li>(6) Issues raised:</li> </ul>		(2) Date of filing
(4) Result:         (5) Date of result:         (6) Issues raised:		
(5) Date of result:         (6) Issues raised:		
		• •
(b) If you answered "No " explain why you did not enpeals		(6) Issues raised:
(b) If you answered "No." explain why you did not appeal:		
(b) If you oncovered "No " evaluin why you did not appeal.		
(b) If you anaward "No" avalain why you did not appeal:		
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(b) If you answered "No" avalain why you did not appeal:		
(b) If you answered "No" explain why you did not appeal:		
(b) If you answered two, explain why you did not appeal.	(b) If <u>:</u>	you answered "No," explain why you did not appeal:
Second appeal	Second	l appeal

(a) If .	Yes," provide:
	(1) Name of the authority, agency, or court:
	(2) Date of filing:
	<ul><li>(3) Docket number, case number, or opinion number:</li></ul>
	(A) Result:
	(5) Date of result:
	(6) Issues raised:
(b) If y	you answered "No," explain why you did not file a second appeal:
(0) 11 9	
Third	appeal
	he second appeal, did you file a third appeal to a higher authority, agency, or court?
□ Yes	$\square$ No
	Yes," provide:
(a) II	<ul><li>(1) Name of the authority, agency, or court:</li></ul>
	(1) Name of the authority, agency, of court.
	(2) Date of filing:
	<ul><li>(3) Docket number, case number, or opinion number:</li></ul>
	(4) Popult:
	(4) Result: (5) Date of result:
	(6) Issues raised:
(b) If y	you answered "No," explain why you did not file a third appeal:
Motior	n under 28 U.S.C. § 2255
T .1 .	petition, are you challenging the validity of your conviction or sentence as imposed?
In this	
In this	
□Yes	
□Yes	

11.

	If "Yes," provide:
	(1) Name of court:
	(2) Case number:
	(3) Date of filing:
	(4) Result:
	(5) Date of result:
	(6) Issues raised:
(b)	Have you ever filed a motion in a United States Court of Appeals under 28 U.S.C. § 2244(b)(3)(A),
	seeking permission to file a second or successive Section 2255 motion to challenge this conviction or sentence?
	$\Box$ Yes $\Box$ No
	If "Yes," provide:
	(1) Name of court:
	(2) Case number:
	(3) Date of filing:
	(4) Result:
	(5) Date of result:
	(6) Issues raised:
(c)	Explain why the remedy under 28 U.S.C. § 2255 is inadequate or ineffective to challenge your
	conviction or sentence:
Appea	ls of immigration proceedings
Does th	nis case concern immigration proceedings?
□Yes	□No
	If "Yes," provide:
(a)	Date you were taken into immigration custody:
(b)	Date of the removal or reinstatement order:
(c)	Did you file an appeal with the Board of Immigration Appeals?
(-)	$\Box$ Yes $\Box$ No

12.

	If "Yes," provide: (1) Date of filing:	
	(1) Date of ming. (2) Case number:	
	(3) Result:	
	(4) Date of result:	
	(5) Issues raised:	
(d)		lecision to the United States Court of Appeals?
	□ Yes	□ No
	If "Yes," provide:	
	(1) Name of court:	
	(2) Date of filing:	
	(3) Case number:	
	(4) Result:	
	(5) Date of result:	
	(6) Issues raised:	
Other		
	r <b>appeals</b> than the appeals you li	isted above, have you filed any other petition, application, or motion about the issues
Other		isted above, have you filed any other petition, application, or motion about the issues
Other	than the appeals you li in this petition?	
Other raised	than the appeals you li in this petition?	
Other raised Yes If "Ye	than the appeals you list in this petition?	
Other raised Pes If "Ye (a) K	than the appeals you li in this petition? s DNo es," provide:	, or application:
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Other raised Yes If "Ye (a) K (b) N (c) D (d) D	than the appeals you line in this petition? I in this petition? I on Notes," provide: I of petition, motion I ame of the authority, a I ate of filing: Pocket number, case nu	, or application:
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Other raised Pyes If "Ye (a) K (b) N (c) D (d) D (e) R (f) D	than the appeals you line in this petition?	, or application: gency, or court:

### **Grounds for Your Challenge in This Petition**

13. State every ground (reason) that supports your claim that you are being held in violation of the Constitution, laws, or treaties of the United States. Attach additional pages if you have more than four grounds. State the facts supporting each ground. Any legal arguments must be submitted in a separate memorandum.

GROUND ONE:
(a) Supporting facts (Be brief. Do not cite cases or law.):
(a) Supporting facts (be only. Do not call cases of am.).
(b) Did you present Ground One in all appeals that were available to you?
□Yes □No
GROUND TWO:
(a) Supporting facts (Be brief. Do not cite cases or law.):
(b) Did you present Ground Two in all appeals that were available to you?
□Yes □No
GROUND THREE:
GROUND THREE.
(a) Supporting facts (Be brief. Do not cite cases or law.):
(b) Did you present Ground Three in all appeals that were available to you?
$\Box$ Yes $\Box$ No

	GROUND FOUR	:				
	(a) Supporting t	acts (Be brief. Do not cite cases or law.):				
	(1) D'1					
		ent Ground Four in all appeals that were available to you?				
	□ Yes					
	If there are any	If there are any grounds that you did not present in all appeals that were available to you, explain why you did				
		Request for Relief				
		Request for Relief				
St	tate exactly what y	Request for Relief				
St	tate exactly what y					

## **Declaration Under Penalty Of Perjury**

If you are incarcerated, on what date did you place this petition in the prison mail system:

I declare under penalty of perjury that I am the petitioner, I have read this petition or had it read to me, and the information in this petition is true and correct. I understand that a false statement of a material fact may serve as the basis for prosecution for perjury.

Date:

Signature of Petitioner

Signature of Attorney or other authorized person, if any

# **UNITED STATES DISTRICT COURT** EASTERN DISTRICT OF WASHINGTON

# **APPLICATION TO PROCEED** WITHOUT DDEDAVMENT OF

		WITHOUT PREPAYMENT OF
	Plaintiff	FEES AND AFFIDAVIT
	VS	
		Case Number:
	Defendant	
T		declare that I am the (check appropriate box)
<b>1</b> , _		
G	petitioner / plaintiff / movant	G other
28		rt of my request to proceed without prepayment of fees or costs under ay the costs of these proceedings and that I am entitled to the relief
In	n support of this application, I answer the follo	wing questions under penalty of perjury:
1.	Are you currently incarcerated?	<b>G</b> Yes <b>G</b> No (If "No," go to Part 2)
	If "Yes," state the place of your incar	ceration
	Are you employed at the institution? _	Do you receive any payment from the institution?
	Have the institution fill out the Certifica of your incarceration showing at least t	ate portion of this affidavit and attach a ledger sheet from the institution(s) the past <b>six</b> months' transactions.
2.	. Are you currently employed?	G Yes G No
	a. If the answer is "Yes," state the the name and address of your of	e amount of your take-home salary or wages and pay period and give employer.
		a date of your last employment, the amount of your take-home salary or 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 so	elf-employment <b>G</b> Yes <b>G</b> No
	b. Rent payments, interest or divi	dends G Yes G No
	c. Pensions, annuities or life insur	ance payments <b>G</b> Yes <b>G</b> No
	d. Disability or workers compens	ation payments <b>G</b> Yes <b>G</b> No

GYesGNoGYesGNo Gifts or inheritances e. Any other sources f.

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.

4. Do you have <b>any</b> cash or checking or savings	accounts? <b>Q</b> Yes <b>Q</b> No
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If "Yes," state the total amount.

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

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

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.

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

Date

Signature of Applicant

## CERTIFICATE

(Incarcerated applicants only) (To be completed by the institution of incarceration)

certify that the applicant	t named herein has the sum of §	5	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 during the past six months the applicant's average

balance was \$\_\_\_\_\_.