UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ALABAMA

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

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**.

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).

The petition must be legibly handwritten or typewritten and signed by the petitioner under penalty of perjury. If you make a false statement of material fact, you may be prosecuted for perjury.

All questions must be answered concisely in the proper space on the form. If needed, you may attach additional pages. If you attach additional pages, number the pages and identify which section of the petition is being continued. Do <u>NOT</u> write on the back of any page.

In order for your petition to be filed, it must be accompanied by the \$5.00 filing fee. If you are unable to pay the filing fee, you may petition the court to proceed as an indigent party. An Application to Proceed *In Forma Pauperis* is included with this petition.

No more than one petitioner may be named in a petition. Each petitioner must file a separate petition and Application to Proceed *In Forma Pauperis* or filing fee. Your petition may be brought in this court <u>only</u> if you are incarcerated in one of the following counties geographically located in the United States District Court for the Northern District of Alabama: BIBB, BLOUNT, CALHOUN, CHEROKEE, CLAY, CLEBURNE, COLBERT, CULLMAN, DEKALB, ETOWAH, FAYETTE, FRANKLIN, GREENE, JACKSON, JEFFERSON, LAMAR, LAUDERDALE, LAWRENCE, LIMESTONE, MADISON, MARION, MARSHALL, MORGAN, PICKENS, SHELBY, ST. CLAIR, SUMTER, TALLADEGA, TUSCALOOSA, WALKER, or WINSTON.

You must include in this petition all grounds for relief and all facts supporting such grounds for relief. If you fail to do so, you may be barred from presenting additional grounds at a later date.

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

Mail the original petition and the filing fee of \$5.00 or an Application to Proceed *In Forma Pauperis* to the following address: Clerk's Office, United States District Court, Northern District of Alabama, Room 140, Hugo L. Black U.S. Courthouse, 1729 5th Avenue North, Birmingham, AL 35203-2195 or Clerk's Office, United States District Court, Northern District of Alabama, 101 Holmes Avenue, Huntsville, AL 35801.

AO 242 (Rev. 10/16) Petition for a Writ of Habeas Corpus Under 28 U.S.C. § 2241

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ALABAMA

Petitioner (Full name)

-V-

Civil Action No.

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(to be filled in by the Clerk's Office)

Respondent (*Name of warden or authorized person having custody of petitioner.*)

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

Personal Information

1.	(a)	Your full name:					
	(b)	Other names you have used:					
2.	Place of	of confinement:					
	(a)	Name of Institution:					
	(b)	Address:					
	(c)	Your prisoner identification number:					
3.	Are you currently being held on orders by:						
		Federal authorities \Box State authorities \Box Other – explain:					
4.	Are yo	ou 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) Date of sentencing:						
		Being held on an immigration charge						
		Other (explain)						
5.	What	are you challenging in this petition:						
		How your sentence is being carried out, calculated, or credited by prison or parole authorities (for						
		example, revocation or calculation of good time credits)						
		Pretrial detention						
		Immigration detention						
		Detainer						
		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)						
6.	Provi	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:						
		Your Earlier Challenges of the Decision or Action						
7.	First	Appeal						
	Did y	you appeal the decision, file a grievance, or seek an administrative remedy?						
		Yes 🗆 No						

(a) If "Yes," provide:

	(1)	Name of 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)	If you	answered "No," explain why you did not appeal:
	÷	
Secor	nd Appe	al
	nd Appe the first	
After	the first	appeal, did you file a second appeal to a higher authority, agency, or court:
After	the first Yes	appeal, did you file a second appeal to a higher authority, agency, or court:
After	the first Yes If "Ye	appeal, did you file a second appeal to a higher authority, agency, or court: Image: No es," provide:
After	the first Yes If "Ye (1)	appeal, did you file a second appeal to a higher authority, agency, or court: Image: Destruction No Ses," provide: Name of authority, agency, or court:
After	the first Yes If "Ye (1) (2)	appeal, did you file a second appeal to a higher authority, agency, or court: Image: No es," provide: Name of authority, agency, or court: Image: Date of filing:
After	the first Yes If "Ye (1) (2) (3)	appeal, did you file a second appeal to a higher authority, agency, or court: Image: Image
After	the first Yes If "Ye (1) (2) (3) (4)	appeal, did you file a second appeal to a higher authority, agency, or court: Image: No es," provide: Name of authority, agency, or court: Date of filing: Image: Docket number, case number, or opinion number: Result:
After	the first Yes If "Ye (1) (2) (3) (4) (5)	appeal, did you file a second appeal to a higher authority, agency, or court: □ No es," provide: Name of authority, agency, or court:
After	the first Yes If "Ye (1) (2) (3) (4)	appeal, did you file a second appeal to a higher authority, agency, or court: Image: No es," provide: Name of authority, agency, or court: Date of filing: Image: Docket number, case number, or opinion number: Result:
After	the first Yes If "Ye (1) (2) (3) (4) (5)	appeal, did you file a second appeal to a higher authority, agency, or court: □ No es," provide: Name of authority, agency, or court:
After	the first Yes If "Ye (1) (2) (3) (4) (5)	appeal, did you file a second appeal to a higher authority, agency, or court: □ No es," provide: Name of authority, agency, or court:
After	the first Yes If "Ye (1) (2) (3) (4) (5)	appeal, did you file a second appeal to a higher authority, agency, or court: □ No es," provide: Name of authority, agency, or court:
After	the first Yes If "Ye (1) (2) (3) (4) (5)	appeal, did you file a second appeal to a higher authority, agency, or court: □ No es," provide: Name of authority, agency, or court:
After	the first Yes If "Ye (1) (2) (3) (4) (5)	appeal, did you file a second appeal to a higher authority, agency, or court: □ No es," provide: Name of authority, agency, or court:
	the first Yes If "Ye (1) (2) (3) (4) (5)	appeal, did you file a second appeal to a higher authority, agency, or court: □ No es," provide: Name of authority, agency, or court:

9. Third Appeal

After the second appeal, did you file a third appeal to a higher authority, agency, or court:

Yes No If "Yes," provide: (a) (1)Name of authority, agency, or court: (2) Date of filing: Docket number, case number, or opinion number: (3)(4) Result: (5) Date of result: (6) Issues raised: (b) If you answered "No," explain why you did not file a third appeal: 10. Motion Under 28 U.S.C. § 2255 In this petition, are you challenging the validity of your conviction or sentence as imposed? Yes No If "Yes," answer the following: Have you already filed a motion under 28 U.S.C. § 2255 that challenged this conviction or (a) Yes sentence? No If "Yes," provide: (1)Name of court: (2)Case number: (3) Date of filing: Result: (4) (5) Date of result: Issues raised: (6)

	(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?							
	(c)	Explain why the remedy under 28 U.S.C. § 2255 is inadequate or ineffective to challenge your							
		conviction or sentence:							
11.	Арре	Appeals of immigration proceedings							
		bes this case concern immigration proceedings?							
		Yes 🗆 No							
	If "Ye	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							
	If "Ye	es," provide:							
		(1) Date of filing:							
		(2) Case number:							
		(3) Result:							
		(4) Date of result:							

5

		(5)	Issues raised:					
	(d)	Did yo	ou appeal the decision to the United States Court of Appeals?					
			Yes 🗆 No					
		If "Ye	s," provide:					
		(1)	Name of court:					
		(2)	Date of filing:					
		(3)	Case number:					
		(4)	Result:					
		(5)	Date of result:					
		(6)	Issues raised:					
12.	Othe	r appeal	s					
	Other than the appeals you listed above, have you filed any other petition, application, or motion about							
	the is	sues raise	ed in this petition?					
		Yes						
	If "Ye	'Yes," provide:						
	(a)	Kind of	of petition, motion, or application:					
	(b)	Name	of authority, agency, or court:					
	(c)		of filing:					
	(d)		et number, case number, or opinion number:					
	(e)		::					
	(f)	Date of	of result:					

(g)	Issues raised:
	Grounds for Your Challenge in This Petition
State	every ground (reason) that supports your claim that you are being held in violation of the
Const	titution, laws, or treaties of the United States. Attach additional pages if you have more than four
•	nds. State the facts supporting each ground.
GRO	OUND ONE:
(a)	Supporting facts (Be brief. Do not cite cases or law.):
(b)	Did you present Ground One in all appeals that were available to you?
(0)	\Box Yes \Box No
GRO	OUND TWO:
(a)	Supporting facts (Be brief. Do not cite cases or law.):

(b)		uou maccant (Secured Truco	in all annas	la that was		to you?		
(b)		you present G Yes		No	ars that we	re available	to you?		
CDO									
GKU		`HREE :							
(a)	Supp	orting facts (Be brief. Do	not cite ca	ses or law	.):			
(b)	Didy	Did you present Ground Three in all appeals that were available to you?							
		Yes		No					
(a)	Supp	ontina facta (Robrief Do			.).			
(a)	Supp	orting facts (Be briej. Do	o not cite ca	ses or law	.):			
(b)	Did	you present G	Fround Four	in all appea	als that we	re available	to you?		
		Yes		No					
If the	re are a	ny grounds th	at you did n	ot present i	in all appea	als that were	e available	to you, exp	olain why you
did n	ot:								

14.

Request for Relief

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, if any

FOR USE BY INCARCERATED PERSONS

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ALABAMA

APPLICATION TO PROCEED IN FORMA PAUPERIS

Declaring that the personal and financial information I have given below is true and correct, I apply to this court for authority to proceed with this case without prepayment of fees, costs, or security.

1.	Your full name:										
	Present mailing address:										
2.	Are y	you presently employed? Yes No									
	If the	e answer is "Yes," give the name and address of your employer a	and the a	mount	of you	r usual					
	mont	hly salary or wages.									
	Nam	e and Address:									
	Amo	unt of earnings: \$ per (<i>specify pay period</i>)									
	If the	If the answer is "No," give the name and address of your last employer, when you last worked, and the									
	amou	amount of the monthly salary or wages you were receiving.									
	Nam	e and Address:									
	Date	last worked:									
	Amo	Amount of earnings: \$ per (specify pay period)									
	Have	Have you received within the past twelve months any money from any of the following sources?									
	(a)	Business, profession, or any form of self-employment?		Yes		No					
	(b)	Interest, dividends, rents or investment income of any kind?		Yes		No					
	(c)	Pensions, annuities, or life insurance payments?		Yes		No					
	(d)	Gifts or inheritances?		Yes		No					
	(e)	Any other sources?		Yes		No					
	If the	e answer to any of the above is "Yes," describe each source of money	and state	e the an	nount r	eceived					
	from	each during the past twelve months:									

4.	Do you own cash, or do you have any money in any checking or saving accounts, including your prison
	or jail account? \Box Yes \Box No
	If the answer is "Yes," state the total amount: \$
5.	Do you own any real estate, stocks, bonds, notes, automobiles, boats, or other valuable property
	(excluding ordinary household items and clothing)? \Box Yes \Box No
	If the answer is "Yes," describe the property and state its approximate value:
6.	List the persons who are dependent upon you for support, stating your relationship to them and how
	much you contribute toward their support:
	I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.
Dated:	
	SIGNATURE OF PETITIONER

ADDRESS

PRISONER NUMBER

$\star\star\star$ IMPORTANT NOTICE $\star\star\star$

Your application to proceed *in forma pauperis* is NOT COMPLETE and WILL NOT BE CONSIDERED by the court unless the page entitled "INFORMATION REGARDING PRISONER ACCOUNTS" is properly completed and certified.

INFORMATION REGARDING PRISONER ACCOUNTS

The Prison Litigation Reform Act, Pub. L. No. 104-134, § 804, requires a prisoner seeking to proceed *in forma pauperis* to submit information regarding his prison or jail trust account for the six (6) months preceding the filing of the complaint. This information must be obtained from the appropriate official of each prison or institution at which the prisoner is or was confined within the past six (6) months. This information <u>must</u> be certified by prison or jail personnel and <u>must</u> include <u>both</u> the total deposits made to the prisoner's account each and every month for the preceding six (6) months and the average monthly balance in the account each and every month during the preceding six (6) months. Information for **six (6) full months** must be provided.

CERTIFICATION

I hereby certify that prisoner	has been incarcerated
in this institution since,	, and that the prisoner has the sum of
\$ in his/her prison or jail trust account on this th	ne day of I further
certify that the information provided below is true and correct.	

	Month/Year	Total Deposits Received	Average Account Balance
Month 1		\$	\$
Month 2		\$	\$
Month 3		\$	\$
Month 4		\$	\$
Month 5		\$	\$
Month 6		\$	\$
Current month (if less than full month)		\$	\$

Dated: _____

Signature of Authorized Officer of Institution

Name of Institution