

UNITED STATES COURT OF APPEALS FOR VETERANS CLAIMS
DECLARATION OF FINANCIAL HARDSHIP – RULE 24

(USE THIS FORM WHEN FILING A REQUEST FOR CLASS CERTIFICATION.)

Docket No. (if assigned) _____

_____, Appellant/Petitioner,

v.

Secretary of Veterans Affairs _____, Appellee/Respondent.

I am the appellant/petitioner. I declare by my signature below that payment of the four hundred dollar (\$400) filing fee referenced in Rule 22(e) of the Court's Rules of Practice and Procedure for filing a request for class certification would be a financial hardship for me.

Pursuant to 28 U.S.C. § 1746, I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct.

Signature of Appellant/Petitioner*

Date

Telephone number

E-mail address

(*To be signed by the appellant/petitioner, NOT the appellant's/petitioner's representative. You may electronically sign by typing "/s/" and then your name in the signature block above: for example, /s/John Doe. **If you are filing this form, do not pay the \$400 filing fee.**)

INSTRUCTIONS

To file this declaration, either

(1) Email it to esubmission@uscourts.cavc.gov, or if the corresponding appeal or petition is pending, file it in accordance with the Court's E-filing Rules, **OR**

(2) Fax it to (202) 501-5848, **OR**

(3) Send it to

Clerk, U.S. Court of Appeals for Veterans Claims
625 Indiana Avenue, NW, Suite 900
Washington, DC 20004-2950