No. 17-

IN THE SUPREME COURT OF THE UNITED STATES

October Term, 2017

Petitioner,
,
Respondent.
N FORMA PAUPERI

Petitioner, KEITH THARPE, by and through his undersigned counsel, asks leave to file the attached Petition for Writ of Certiorari to the Supreme Court of Georgia without prepayment of fees and costs, and to proceed *in forma pauperis*, pursuant to Rule 39 of the Rules of this Court.

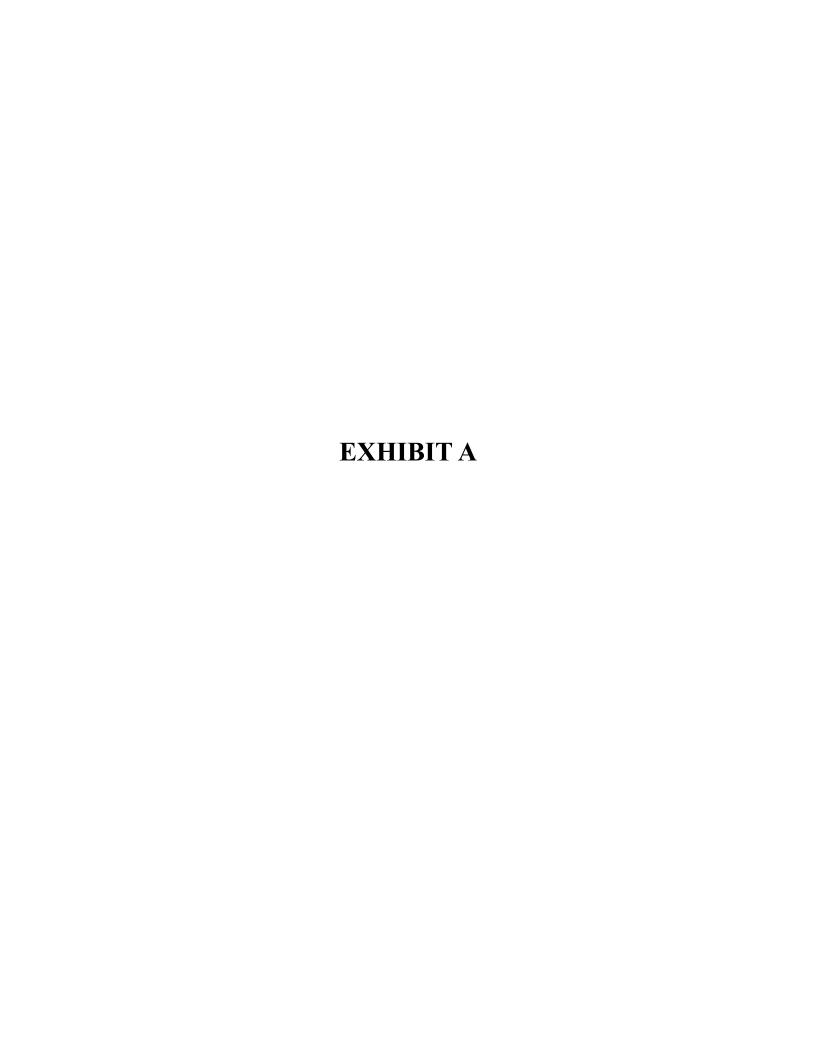
Petitioner's Affidavit in support of this motion is attached hereto as Exhibit A.

This 2nd day of April, 2018.

BRIAN S. KAMMER Georgia Resource Center 303 Elizabeth Street, NE Atlanta, Georgia 30307 (404) 222-9202

12. S. Sh

COUNSEL FOR MR. THARPE



AFFIDAVIT OR DECLARATION IN SUPPORT OF MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

		h Thay		, am	the petiti	ion er in	the above	entitled c	ase.	In suppo	rt of
my	motion to	proceed i	n forma	pauperis,	I state t	that beca	ause of my	poverty	I am	unable to	рау
the	costs of t	his case or	to give	security t	herefor; a	and I be	elieve I am	entitled	to rec	lress.	

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source		e monthly amou t 12 months	unt during	Amount expedinext month	eted
		You	Spouse	You	Spouse
Employment	N/A	\$	\$	\$	\$
Self-employment	N/A	\$	\$	\$	\$
Income from real (such as rental in	property ncome)	\$	\$		
Interest and divide	ends N/A	\$	\$	\$	\$
Gifts		\$ 164.00	\$	\$	\$
Alimony	N/A	\$	\$	\$	\$
Child Support	N/A	\$	\$	\$	\$
Retirement (such security, pensions annuities, insurar	S, "`'	\$	\$	\$	\$
Disability (such as security, insurance	s social WA e payments)	\$	\$	\$	\$
Unemployment pa	yments N/A	\$	\$	\$	\$
Public-assistance (such as welfare)	N/A	\$	\$	\$	\$
Other (specify):		\$	\$	\$	\$
Total montl	hly income:	\$168.00	\$	\$	\$

Employer	Address	Dates of Employment	Gross monthly pay \$ \$ \$
3. List your spouse (Gross monthly p	e's employment histor ay is before taxes or	ry for the past two years, other deductions.)	, most recent employer i
Employer	Address	Dates of Employment	Gross monthly pay
			\$ \$
Financial Institutio	Prisoner Acct.	\$	SS
5. List the assets, and ordinary hou	and their values, whi sehold furnishings.	ch you own or your spous	e owns. Do not list clot
5. List the assets, a and ordinary hou☐ Home	and their values, whi sehold furnishings.	ch you own or your spous	
and ordinary hou	sehold furnishings.	V/A	te
and ordinary hou ☐ Home Value ☐ Motor Vehicle #1	sehold furnishings.	∨/A □ Other real esta Value □ Motor Vehicle #	te
and ordinary hou ☐ Home Value ☐ Motor Vehicle #1	odel	∨/A □ Other real esta Value □ Motor Vehicle #	te #2 nodel
and ordinary hou Home Value Motor Vehicle #1 Year, make & mo	odel	□ Other real esta Value □ Motor Vehicle # Year, make & r	te #2 nodel
and ordinary hou Home Value Motor Vehicle #1 Year, make & mo Value Other assets	odel	□ Other real esta Value □ Motor Vehicle # Year, make & r Value	#2 model

6. State every person, but amount owed.	siness, or organization	n owing you or your	spouse money, and the
Person owing you or your spouse money	Amount owed to	you Amount	owed to your spouse
	\$	\$	
	\$	<u> </u>	
	\$	\$	
7. State the persons who re	ely on you or your spot	ase for support. N/A	
Name	Relations	/ -	Age
8. Estimate the average mo paid by your spouse. A annually to show the more	djust any payments t	and your family. Show	separately the amounts biweekly, quarterly, or
		You	Your spouse
Rent or home-mortgage pay (include lot rented for mobil Are real estate taxes inclu- Is property insurance inclu-	e home) \square Yes \square No	s_ N/A	_{\$} N/A
Utilities (electricity, heating water, sewer, and telephone		\$_N/A	\$_N/A
Home maintenance (repairs	and upkeep)	\$_N/A	\$_N/A
Food		\$ N/A	\$ N/A
Clothing		\$ N/A	\$ N/A
Laundry and dry-cleaning		\$ N/A	\$_N/A
Medical and dental expenses	3	\$ 5.00 Per Sick cell	\$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ N/A	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	* N/A	* N/A
Insurance (not deducted from wages or included in mortg	gage payments)	A
Homeowner's or renter's	s N/A	* N/A
Life	\$	\$
Health	\$	\$
Motor Vehicle	\$	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage	e payments)	
(specify):	\$ N/A	\$ N/A
Installment payments		
Motor Vehicle	\$_N/A_	\$ N/A
Credit card(s)	\$	\$
Department store(s)	\$	\$
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses:	\$	\$

9.	Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?
	☐ Yes No If yes, describe on an attached sheet.
10.	Have you paid – or will you be paying – an attorney any money for services in connection with this case, including the completion of this form? ☐ Yes No
	If yes, how much?
	If yes, state the attorney's name, address, and telephone number:
11	Have you paid—or will you be paying—anyone other than an attorney (such as a paralegal or
11.	a typist) any money for services in connection with this case, including the completion of this form?
	□ Yes No
	If yes, how much?
If y	res, state the person's name, address, and telephone number:
12.	Provide any other information that will help explain why you cannot pay the costs of this case.
-4	- am a prisoner uncler Death Sentence.
I de	eclare under penalty of perjury that the foregoing is true and correct.
Exe	ecuted on: 3-28, , 2018
	Kith Lluye
	(Signature)

THIS FORM IS TO BE COMPLETED ONLY BY AN AUTHORIZED INDIVIDUAL AT THE INSTITUTION WHERE THE INMATE PLAINTIFF IS PRESENTLY INCARCERATED, OR HIS/HER DESIGNEE.

CERTIFICATION I hereby certify that the Plaintiff herein, Keith Tharpe has an-average monthly balance for the last twelve (12) months of \$ on account at Georgia Diag-nostic 3 Classification Prizon institution where confined. (If not confined for a full twelve (12) months, specify the number of months confined. Then compute the average monthly balance on that number of months.) I further certify that Plaintiff likewise has the following securities according to the records of said institution: NA NOTE: Please attach a copy of the prisoner's inmate account of the last 12 months, or the period of incarceration (whichever is less).

Account Statement

THARPE, KEITH

Printed By:

Page: 1 BARBER, SARAH

GDC ID: 173325

Spendable AmountReserved AmountReceipts On HoldFunds BalanceObligations/Court Charges\$48.45\$10.00\$0.00\$58.45\$0.00

			RECEIPTS	
Receipt Date	Transaction ID	Receipt Type	Receipt Details	Receipt Amount
03/21/2018	17929437	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 83565998	\$100.00
03/11/2018	17892470	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 83173925	\$100.00
02/21/2018	17819869	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 82314676	\$100.00
02/08/2018	17775707	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 81842022	\$100.00
01/23/2018	17718426	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 81180376	\$100.00
01/11/2018	17678011	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 80779510	\$100.00
12/29/2017	17634002	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 80271956	\$100.00
12/16/2017	17593392	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 79785151	\$45.00
12/13/2017	17584050	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 79660009	\$25.25
12/07/2017	17563159	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 79423868	\$50.00
11/25/2017	17519326	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 78960355	\$50.00
11/18/2017	17496209	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 78696298	\$50.00
11/07/2017	17460330	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 78295402	\$50.00
10/27/2017	17419966	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77860234	\$50.00
10/27/2017	17419569	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77850470	\$50.75
10/20/2017	17396218	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77613839	\$50.00
10/15/2017	17378611	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77466992	\$25.00
09/28/2017	17318152	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 76815920	\$50.00
09/10/2017	17260415	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 76236181	\$50.00
08/27/2017	17212403	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 75735069	\$50.00
07/14/2017	17061431	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 74246475	\$200.00
06/13/2017	16955317	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 73184841	\$25.00
06/09/2017	16941354	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 73046791	\$125.00
05/19/2017	16866625	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 72324733	\$125.00
04/20/2017	16760039	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 71261905	\$120.00
04/12/2017	16733160	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 71004172	\$40.00
03/17/2017	16639452	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 70061264	\$150.00
03/01/2017	16574125	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 69421428	\$143.00
02/08/2017	16498637	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 68616056	\$100.00
01/26/2017	16453373	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 68121901	\$100.00
01/12/2017	16406639	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 67669424	\$120.00
12/24/2016	16346916	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 66983996	\$50.00
12/17/2016	16323549	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 66695694	\$130.00

No. 17-

IN THE SUPREME COURT OF THE UNITED STATES

October Term, 2017

KEITH THARPE,	Petitioner,
ERIC SELLERS, WARDEN,	Respondent.

This is to certify that I have served a copy of the foregoing document this day by electronic transmission and/or U.S. Mail, on counsel for Respondent at the following address:

Sabrina Graham, Esq. Senior Assistant Attorney General sgraham@law.ga.gov 132 State Judicial Building 40 Capitol Square, S.W. Atlanta, Georgia 30334-1300

This 2nd day of April, 2018.

Attorney

Bish