

No. 17A929

Extension of Time Application Number:
17A929

IN THE

SUPREME COURT OF THE UNITED STATES

Stephen Patrick Black — PETITIONER
(Your Name)

VS.

State of Texas — RESPONDENT(S)

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

Please check the appropriate boxes:

Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

Supreme Court of Texas

Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

Petitioner's affidavit or declaration in support of this motion is attached hereto.

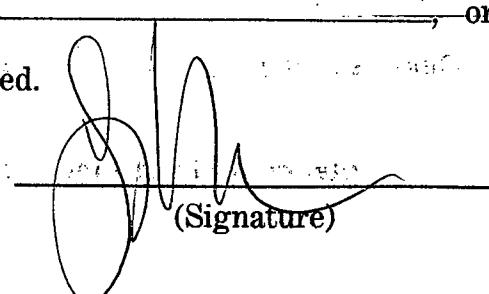
Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

The appointment was made under the following provision of law: _____

, or

a copy of the order of appointment is appended.

(Signature)



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

I, Stephen Patrick Black, am the petitioner in the above-entitled case. In support of my motion to proceed *in forma pauperis*, I state that because of my poverty I am unable to pay the costs of this case or to give security therefor; and I believe I am entitled to redress.

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	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>50.00</u>	\$ <u>0</u>	\$ <u>50.00</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify):	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>50.00</u>		\$ <u>50.00</u>	

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay
Prison Civil Commitment			\$ <input type="text"/>
			\$ <input type="text"/>
			\$ <input type="text"/>

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay
N/A			\$ <input type="text"/>
			\$ <input type="text"/>
			\$ <input type="text"/>

4. How much cash do you and your spouse have? \$

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
Civil Commitment Center	Trust	\$ 55.00 Approx.	\$ N/A
		\$ <input type="text"/>	\$ <input type="text"/>
		\$ <input type="text"/>	\$ <input type="text"/>

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home
Value

Other real estate
Value

Motor Vehicle #1
Year, make & model
Value

Motor Vehicle #2
Year, make & model
Value

Other assets
Description None
Value

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

**Person owing you or
your spouse money**

Amount owed to you

Amount owed to your spouse

N/A

\$ _____
\$ _____
\$ _____

\$ _____
\$ _____
\$ _____

7. State the persons who rely on you or your spouse for support.

Name

Relationship

Age

N/A

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, or annually to show the monthly rate.

You

Your spouse

Rent or home-mortgage payment
(include lot rented for mobile home)

\$ 0 \$ N/A

Are real estate taxes included? Yes No

Is property insurance included? Yes No

Utilities (electricity, heating fuel,
water, sewer, and telephone)

\$ 0 \$ _____

Home maintenance (repairs and upkeep)

\$ 0 \$ _____

Food

\$ 0 \$ _____

Clothing

\$ 0 \$ _____

Laundry and dry-cleaning

\$ 0 \$ _____

Medical and dental expenses

\$ 0 \$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ _____
Life	\$ <u>0</u>	\$ _____
Health	\$ <u>0</u>	\$ _____
Motor Vehicle	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ _____
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ _____
Credit card(s)	\$ <u>0</u>	\$ _____
Department store(s)	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ _____
Other (specify): _____	\$ <u>0</u>	\$ _____
Total monthly expenses:	\$ <u>0</u>	\$ _____

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 a typist) any money for services in connection with this case, including the completion of this form?

Yes No

If yes, how much? _____

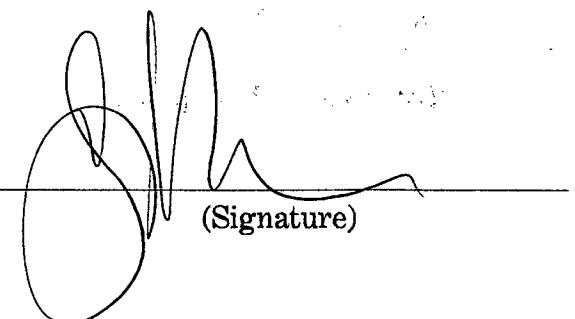
If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the costs of this case.

I am detained in a maximum-security facility and cannot work, or receive benefits.

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

Executed on: May 1st, 2018



(Signature)

TAX 10 2018
JAN 11 2018

CERTIFICATE OF RESIDENT TRUST ACCOUNT

M.Salinas, the undersigned person in charge of Resident trust accounts, do swear under penalty of perjury that, Stephen Patrick Black a resident at THE TEXAS CIVIL COMMITMENT CENTER, certify their Trust Account Balance:

1. On this day the resident has in his account the sum of \$21.76.

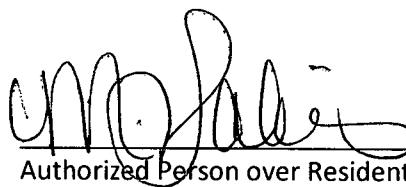
2. During the past six months, the resident's:

Average monthly balance was \$29.75.

Average monthly deposits to the resident's account were \$75.00.

Attached is a certified copy of the resident's trust account statement showing transactions of the past six months.

Signed this 10th day of Jan., 2017.

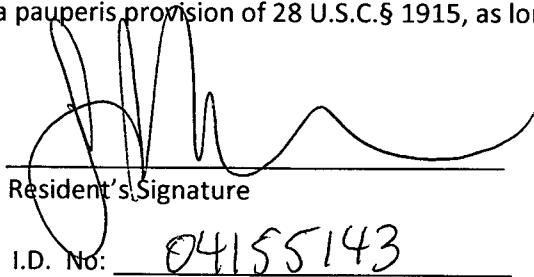


Authorized Person over Resident Trust Accounts

Mariah Salinas
Accounting Specialist
Texas Civil Commitment Center

AUTHORIZATION

I, the under signed resident, authorize the Texas Civil Commitment Center, where I currently reside, to withdraw and forward to the court any initial partial filing fee or appeal fee and any subsequent installments ordered by a court under the in forma pauperis provision of 28 U.S.C. § 1915, as long as I'm not an indigent resident.



Resident's Signature
I.D. No: 04155143

=====
Correct Care Texas Civil Commitment Center
=====Resident Account Summary
Friday, January 12, 2018 @11:17
=====

For CIN: 04155143 BLACK, STEPHEN PATRICK

Date	Transaction	Description	Amount	Balance	Owed	Held	Reference
01/08/2018	EPR	OID:100009127-ComisaryPurc	-20.69	21.76	0.00	0.00	01/08/2018
12/18/2017	WDRAWAL CHE	TCCO MONTHLY FEES	-30.18	42.45	0.00	0.00	12/18/2017
12/18/2017	EPR	OID:100008860-ComisaryPurc	-23.43	72.63	0.00	0.00	12/18/2017
12/15/2017	DEPOSIT MO	POSTAL MONEY ORDER	75.00	96.06	0.00	0.00	12/15/2017
12/06/2017	RES WHOUSE	SHOE LACES	-0.22	21.06	0.00	0.00	12/06/2017
10/30/2017	EPR	OID:100008290-ComisaryPurc	-0.95	21.28	0.00	0.00	10/30/2017
10/16/2017	ERF	OID:100008071-ComisaryRefi	0.95	22.23	0.00	0.00	10/16/2017
10/09/2017	EPR	OID:100008071-ComisaryPurc	-0.95	21.28	0.00	0.00	10/09/2017
10/02/2017	EPR	OID:100007967-ComisaryPurc	-2.82	22.23	0.00	0.00	10/02/2017
10/02/2017	ERF	OID:100007812-ComisaryRefi	1.30	25.05	0.00	0.00	10/02/2017
09/25/2017	EPR	OID:100007916-ComisaryPurc	-18.40	23.75	0.00	0.00	09/25/2017
09/19/2017	EPR	OID:100007812-ComisaryPurc	-27.94	42.15	0.00	0.00	09/19/2017
09/12/2017	EPR	OID:100007715-ComisaryPurc	-17.95	70.09	0.00	0.00	09/12/2017
09/11/2017	WDRAWAL CHE	STEPHEN BLACK 04155143	-33.00	88.04	0.00	0.00	09/11/2017
09/08/2017	DEPOSIT MO	POSTAL MONEY ORDER	100.00	121.04	0.00	0.00	09/08/2017
08/15/2017	EPR	OID:100007329-ComisaryPurc	-3.15	21.04	0.00	0.00	08/15/2017
08/09/2017	ERF	OID:100007174-ComisaryRefi	2.27	24.19	0.00	0.00	08/09/2017
08/01/2017	EPR	OID:100007174-ComisaryPurc	-30.97	21.92	0.00	0.00	08/01/2017
08/01/2017	WDRAWAL CHE	TCCO MONTHLY FEES	-16.50	52.89	0.00	0.00	08/01/2017
07/26/2017	PHOTOGRAPHY	4 PHOTOS	-2.00	69.39	0.00	0.00	07/26/2017
07/24/2017	DEPOSIT MO	POSTAL MONEY ORDER	50.00	71.39	0.00	0.00	07/24/2017