

No. 17A1013

IN THE
SUPREME COURT OF THE UNITED STATES

Deante Drake — PETITIONER
(Your Name)

VS.

UNITED STATES — 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):

Third Circuit Court of Appeals, Philadelphia, PA 19106

☐ 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: Under Title 18 USCS § 3006A; RE; Request For Appointment of Counsel, or

☐ a copy of the order of appointment is appended.

Deante Drake
(Signature)

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

I, Deante Drake, Pro-se, 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 /Prisoner	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Self-employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Gifts See; Inmate Trust	\$ <u>Account</u>	\$ <u>For past</u>	\$ <u>6-Months</u>	\$ <u>F/Family</u>
Alimony	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Child Support	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>None</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>See Attach</u> \$ <u>6-Months</u>		\$ <u>TruFacs</u>	\$ <u>Accounts</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
BOP	FCI/Beckley/Camp	N/A	\$ N/A
N/A	N/A	N/A	\$ N/A
BOP Prisoner	Since 2007	N/A	\$ N/A

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	N/A	N/A	\$ N/A
N/A	N/A	N/A	\$ N/A
N/A	N/A	N/A	\$ N/A

4. How much cash do you and your spouse have? \$ See Attach TruFacs Account
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
None	\$ See Account	\$ N/A
None	\$ See Account	\$ N/A
None	\$ See Account	\$ N/A

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

☐ Home
Value N/A

☐ Other real estate
Value N/A

☐ Motor Vehicle #1 N/A
Year, make & model N/A
Value N/A

☐ Motor Vehicle #2 N/A
Year, make & model N/A
Value N/A

☐ Other assets
Description N/A
Value N/A

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	\$ N/A	\$ N/A
N/A	\$ N/A	\$ N/A
N/A	\$ N/A	\$ N/A

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

Name	Relationship	Age
N/A	N/A	N/A
N/A	N/A	N/A
N/A	N/A	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)	\$ N/A	\$ N/A
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, 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	\$ N/A	\$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>N/A</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>N/A</u>	\$ <u>N/A</u>
Life	\$ <u>N/A</u>	\$ <u>N/A</u>
Health	\$ <u>N/A</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>None</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>None See Attach TruFacs</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>None See Attach TruFacs</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>None See Attach TruFacs</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>N/A</u>	\$ <u>N/A</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? I have been a BOP Prisoner since 2007 I only have what my Family & Friends send me

☐ 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 I am requesting 18 USCS § 3006A Appointment of Counsel/From New CJA Funds 7.1Billion
If yes, how much? _____

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

Request 18 USCS § 3006A-Appointment of Counsel From New CJA
Funds approved by President Donald J. Trump, 7.1-Billion

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

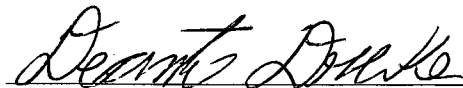
If yes, how much? N/A

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

Executed on: June 25, 2018



(Signature)

Editorial Information: Prior History

By Melissa Heelan Stanzione

- Court-appointed private lawyers will get \$ 140/hour, \$ 8 increase
- Jurors' daily fee goes up \$ 10 to \$ 50/day starting May 7

Opinion

Federal jurors will get their first pay boost in nearly 30 years and court-appointed attorneys also will make more per hour under the new spending law that went into effect last week.

"We are especially pleased that Congress recognized the critical public service provided by the citizens who serve on juries as well as the attorneys who represent defendants who can't afford a lawyer," James C. Duff, director of the Administrative Office of the U.S. Courts, said in a statement.

The omnibus measure that **funds** the U.S. government for the current fiscal year that ends Sept. 30 and signed by **President Donald Trump March 23** outlays \$ **7.1** billion for the federal judiciary, a \$ 184 million or 2.7 percent increase over last year's figure.

Criminal Justice Act panel attorneys, appointed by the courts to represent defendants, will get an additional \$ 8 per hour in non-death penalty cases for a total of \$ 140 per hour, and an additional \$ 3 per hour in death penalty cases for a total of \$ 188 per hour.

The daily fee for jurors will go from \$ 40 per day to \$ 50 per day beginning May 7. This is the first such increase in almost 30 years, the court office statement said. This includes grand jurors and those who serve on trials.

The General Services Administration, which oversees Judiciary facilities, also received \$ 437 million for new courthouse projects.

Courthouses in Harrisburg, Pa., Huntsville, Ala., and Fort Lauderdale, Fla., will receive the **funds**. Those facilities don't have enough space and have "significant security issues, with prisoners, judges and the public all using the same elevators and hallways," the statement said.

The **funding** measure also covered year-long extensions for nine temporary district judgeships whose authorizations expire this fiscal year.

To contact the reporter on this story: Melissa Heelan Stanzione in Washington at mstanzione@bloomberglaw.com

To contact the editor responsible for this story: Jessie Kokrda Kamens at jkamens@bloomberglaw.com

Press release at [\\$198:180328T1259480400](http://src.bna.com/xox)

Inmate Inquiry



Inmate Reg #: 05730087

Current Institution: Beckley FCI

Inmate Name: DRAKE, DEANTE

Housing Unit: BEC-E-A

Report Date: 06/20/2018

Living Quarters: E02-120U

Report Time: 9:12:44 AM

General Information

Account Balances

Commissary History

Commissary Restrictions

Comments

General Information

Administrative Hold Indicator: No

No Power of Attorney: No

Never Waive NSF Fee: No

Max Allowed Deduction %: 100

PIN: 6232

PAC #: 409705222

Revalidation Date: 1st

FRP Participation Status: Completed

Arrived From: OKL

Transferred To:

Account Creation Date: 5/22/2008

Local Account Activation Date: 5/17/2018 4:12:59 AM

Sort Codes:

Last Account Update: 6/20/2018 6:38:55 AM

Account Status: Active

Phone Balance: \$2.51

Pre-Release Plan Information

Target Pre-Release Account Balance: \$0.00

Pre-Release Deduction %: 0%

Income Categories to Deduct From: ☐ Payroll ☐ Outside Source Funds

FRP Plan Information

FRP Plan Type	Expected Amount	Expected Rate
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Account Balances

Account Balance: \$1,648.01

Pre-Release Balance: \$0.00

Debt Encumbrance: \$0.00

SPO Encumbrance: \$0.00

Other Encumbrances: \$171.00

Outstanding Negotiable Instruments: \$0.00

Administrative Hold Balance: \$0.00
Available Balance: \$1,477.01
National 6 Months Deposits: \$1,251.68
National 6 Months Withdrawals: \$1,495.41
Available Funds to be considered for IFRP Payments: \$801.68
National 6 Months Avg Daily Balance: \$2,037.38
Local Max. Balance - Prev. 30 Days: \$1,994.02
Average Balance - Prev. 30 Days: \$1,782.97

Commissary History

Purchases

Validation Period Purchases: \$104.14
YTD Purchases: \$216.01
Last Sales Date: 6/19/2018 11:11:58 AM

SPO Information

SPO's this Month: 0
SPO \$ this Quarter: \$0.00

Spending Limit Info

Spending Limit Override: No
Weekly Revalidation: No
Bi-Weekly Revalidation: Yes
Spending Limit: \$170.00
Expended Spending Limit: \$36.25
Remaining Spending Limit: \$133.75

Commissary Restrictions

Spending Limit Restrictions

Restricted Spending Limit: \$0.00
Restricted Expended Amount: \$0.00
Restricted Remaining Spending Limit: \$0.00
Restriction Start Date: N/A
Restriction End Date: N/A

Item Restrictions

List Name	List Type	Start Date	End Date	Active
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