No.

In The Supreme Court of the United States

CORVAIN T. COOPER, Petitioner, v.

UNITED STATES OF AMERICA, Respondent.

On Petition For A Writ Of Certiorari To The United States Court Of Appeals for the Fourth Circuit

MOTION FOR PERMISSION TO APPEAL IN FORMA PAUPERIS

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May 14, 2018

MOTION TO PROCEED IN FORMA PAUPERIS PURSUANT TO RULE 39

Petitioner, Corvain T. Cooper, respectfully requests that this Court permit him to appeal in forma pauperis pursuant to Rule 39 of the Rules of the Supreme Court.

Petitioner was found originally found indigent by the United States District Court for the Western District of North Carolina. He was represented by assigned counsel throughout trial proceedings in that court. After the verdict, but prior to sentencing, Mr. Cooper's mother retained undersigned counsel's former firm to represent him at sentencing and on direct appeal. I was assigned the case at the former firm, and represented Mr. Cooper at sentencing. After his mother began to experience financial difficulties and became unable to continue to pay the firm's fee, I left the firm and agreed to represent Mr. Cooper pro bono on direct appeal to the Fourth Circuit. After his unsuccessful direct appeal, I again represented Mr. Cooper pro bono in this Court in his last petition for certiorari on direct appeal. I represented him pro bono upon his application for executive clemency to President Barack Obama, and represented him pro bono in his § 2255 petition, and his application for a Certificate of Appealability in the Fourth Circuit. I have agreed to represent him again in this Court at this stage, and in another application for executive Clemency to President Donald Trump

Because undersigned counsel believes in the issues raised in this case, and because undersigned counsel has made a promise not to abandon Petitioner, undersigned counsel has agreed to continue to represent Petitioner pro bono.

An affidavit of indigency is attached hereto. Petitioner does not own any assets, has no income, no savings, and no other access to funds.

For these reasons, Petitioner respectfully requests permission to appeal in forma pauperis.

Respectfully submitted on this 14th day of May,

2018.

Patrick Michael Megaro, Esq.*

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CERTIFICATE OF SERVICE

Pursuant to Rule 29.5 of the Supreme Court of the United of America, the following parties have been served via USPS mail on May 14, 2018

Solicitor General of the United States Room 5616 Department of Justice, 950 Pennsylvania Avenue, N. W. Washington, DC 20530-0001

AUSA Elizabeth M. Greenough, Esq. Office of the United States Attorney 227 West Trade Street, Suite 1650 Charlotte, North Carolina 28202 Elizabeth.Greenough@usdoj.gov

Patrick Michael Megaro, Esq.

IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF NORTH CAROLINA CHARLOTTE DIVISION

-----X Docket # 3:11-CR-00337

UNITED STATES OF AMERICA,	
-against-	
CORVAIN T. COOPER,	
Defendant.	X Before: Hon. Robert J. Conrad, Jr.
AFFIDAVIT ACCOM FOR PERMISSION TO APPI	
Affidavit in Support of Motion	Instructions
I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)	Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.
	,

My issues on appeal are:

- 1. Whether Petitioner is entitled to resentencing because both of the predicate state convictions and sentences that resulted in his Federal life sentence were vacated subsequent to the conclusion of his direct appeal
- 2. Whether Petitioner received ineffective assistance of counsel
- 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	\$	\$	\$	\$
Self-employment	\$	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$	\$	\$	\$
Disability (such as social security, insurance payments)	\$	\$	\$	\$
Unemployment payments	\$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	\$	\$	\$	\$
Total monthly income:	s NA	\$	\$	\$

2. List your 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
			\$ NA
			\$
			\$

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
•			\$
			\$

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

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
NA		\$	\$
(\$	\$
		\$	\$

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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

Home	Other real estate	Motor vehicle #1
(Value) \$	(Value) \$	(Value) \$
		Make and year:
		Model:
N/A		Registration #:

Motor vehicle #2	Other assets	Other assets	
(Value) \$	(Value) \$	(Value) \$	
Make and year:	NA		
Model:			
Registration #:			

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
NA	\$	\$
	\$	\$
	\$	\$
	\$	\$

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

Name [or, if under 18, initials only]	Relationship	Age
SCOTYLN COOPER	DAUGHTER	8
CLEER COOPER	DAUGHTER	12

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, semiannually, or annually to show the monthly rate.

	You	Your Spouse
Rent or home-mortgage payment (include lot rented for mobile home)		\$
Are real estate taxes included? [] Yes [] No Is property insurance included? [] Yes [] No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$	\$

Home maintenance (repairs and upkeep)	\$	\$
Food	\$	\$
Clothing	\$	\$
Laundry and dry-cleaning	\$	\$
Medical and dental expenses	\$	\$
Transportation (not including motor vehicle payments)	\$	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mortgage page	yments)	
Homeowner's or renter's:	\$	\$.
Life:	\$	\$
Health:	\$	\$
Motor vehicle:	\$	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$	\$
Installment payments		
Motor Vehicle:	\$	\$
Credit card (name):	\$	\$
Department store (name):	\$	\$
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:	\$ NA	\$

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 spent — or will you be spending — any money for expenses or attorney fees in connection with this lawsuit? [] Yes [X No
	If yes, how much? \$
11.	Provide any other information that will help explain why you cannot pay the docket fees for your appeal.
family	e been incarcerated for several years and own no assets and have no income. My y cannot pay any additional legal fees as she cannot afford them. Patrick Michael ro has agreed to represent me pro bono in this case.
12.	State the city and state of your legal residence. 217 & 64 TH PLACE IN 61 & WOOD CA 9030 > Your daytime phone number: () N/A

Your age: 38 Your years of schooling: 19

Last four digits of your social-security number: 4283