

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

JOHN THOMPSON — PETITIONER
(Your Name)

VS.

UNITED STATES OF AMERICA — RESPONDENT(S)

PROOF OF SERVICE

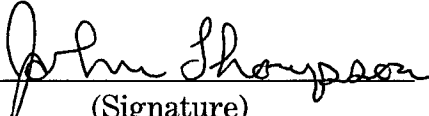
I, **John Thompson**, do swear or declare that on this date, _____, 20**18**, as required by Supreme Court Rule 29 I have served the enclosed MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS* and PETITION FOR A WRIT OF CERTIORARI on each party to the above proceeding or that party's counsel, and on every other person required to be served, by depositing an envelope containing the above documents in the United States mail properly addressed to each of them and with first-class postage prepaid, or by delivery to a third-party commercial carrier for delivery within 3 calendar days.

The names and addresses of those served are as follows:

Edward Arthur Imperatore	Solicitor General of the United States
United States Attorney's Office, SDNY	Room 5614, Department of Justice
One Saint Andrew's Plaza	950 Pennsylvania Avenue, N. W.
New York, NY 10007	Washington, D. C. 20530-0001

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

Executed on 8-8-, 2018


(Signature)

IN THE
Supreme Court of the United States

JOHN THOMPSON,

Petitioner,

v.

UNITED STATES OF AMERICA,

Respondent.

PROOF OF SERVICE

I, JOHN THOMPSON, do swear or declare that on this date, _____, 2018, as required by U. S. Supreme Court Rule 29, I have served the enclosed PETITION FOR WRIT OF CERTIORARI on each party to the above proceeding or that party's counsel, and on every other person required to be served, by depositing an envelope containing the above documents in the United States mail properly addressed to each of them and with first-class, postage prepaid, to the Solicitor General of the United States, Room 5614, Department of Justice, 950 Pennsylvania Avenue, N. W., Washington, D. C. 20530-0001.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.

Executed on 8-8-, 2018


JOHN THOMPSON