

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

Robert JOSEPH SARKIS, MD PETITIONER
(Your Name)

VS.

Dept of Justice Federal Prison 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):

THE Eleventh Circuit Court OF Appeals

U.S. District Court Southern District of Florida

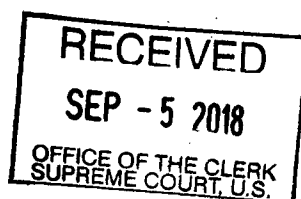
☐ Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

☐ 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.



Robert J. Sarkis MD
(Signature)

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

I, Robert Joseph Sarin, MD, 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>2,303.00</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Self-employment	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Income from real property (such as rental income)	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Interest and dividends	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Gifts	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Alimony	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Child Support	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Disability (such as social security, insurance payments)	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Unemployment payments	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Other (specify): _____	\$ <u>Ø</u>	\$ _____	\$ <u>Ø</u>	\$ _____
Total monthly income:	\$ <u>2,303.00</u>	\$ _____	\$ <u>Ø</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
Ocean Drive Limousine	642 Mokena Dr	2/1/2016 - present	\$ 2000.00
	Miami, Florida		\$
			\$

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
			\$
			\$
			\$

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.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
Bank of America checking	\$ 300.00	\$ 0
Bank of America savings	\$ 7000.00	\$
	\$	\$

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

☒ Home
Value \$ 600,000.00

☐ Other real estate
Value _____

☒ Motor Vehicle #1
Year, make & model Mercedes 300 2015
Value \$ 18,000.00

☒ Motor Vehicle #2
Year, make & model 2006 VW Jetta
Value \$ 1,000.00

☐ Other assets
Description _____
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
<u>None</u>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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
<u>Robert SACHAW, Jr.</u>	<u>SON</u>	<u>14</u>
_____	_____	_____
_____	_____	_____

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. \$ 1200/month

	You	Your spouse (Not paying mortgage now)
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>1800.00</u>	\$ _____
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)	\$ <u>240.00</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ <u>Ø</u>	\$ _____
Food	\$ <u>200.00</u>	\$ _____
Clothing	\$ <u>Ø</u>	\$ _____
Laundry and dry-cleaning	\$ <u>Ø</u>	\$ _____
Medical and dental expenses	\$ <u>Ø</u>	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>80.00</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>Ø</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>Ø</u>	\$ _____
Life	\$ <u>Ø</u>	\$ _____
Health	\$ <u>Ø</u>	\$ _____
Motor Vehicle	\$ <u>313.00</u>	\$ _____
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ <u>350.00</u>	\$ _____
Credit card(s)	\$ <u>Ø</u>	\$ _____
Department store(s)	\$ <u>Ø</u>	\$ _____
Other: _____	\$ <u>Ø</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>Ø</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____
Total monthly expenses:	\$ <u>1200.00</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.

I hope to win this case and I am trying to find full time employment as a professor. If win our foreclosure will sell our home.

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 *enough*

If yes, how much? \$55,000.00 over the past 11 years

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

Clay Reiner
9100 S. Dadeland Blvd #901
Miami, FL 33156
305-670-8282

Robert L. Moore
6860 Howard Drive
Miami, FL 33156
305-414-2820

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? _____

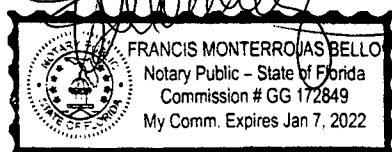
If yes, state the person's name, address, and telephone number:

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

I work as a chauffeur, during the summer time I make about \$90.00/wk. Our season does not start till October to November. I am also a part-time professor, looking for work, and planning to move out of Florida to gain full time employment as a professor.

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

Executed on: August 31, 2018



[Signature]
(Signature)

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA

Case No. 14-23237-Civ-COOKE/TURNOFF

ROBERT JOSEPH SARHAN,

Plaintiff,

vs.

DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS,

Defendant.

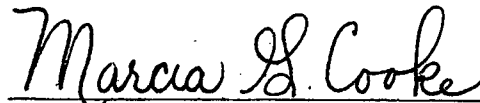
**ORDER GRANTING PLAINTIFF'S APPLICATION TO PROCEED
IN FORMA PAUPERIS AND DIRECTING SERVICE BY U.S. MARSHAL**

THIS CASE is before me on the Plaintiff's Application to Proceed in District Court without Prepaying Fees or Costs (ECF No. 3). I have reviewed the Application, the record, the relevant legal authorities, and am otherwise duly advised in the premises. It is **ORDERED and ADJUDGED** that the Plaintiff's Application to Proceed in District Court without Prepaying Fees or Costs (ECF No. 3) is **GRANTED**.

It is **FURTHER ORDERED** that, within fourteen (14) days of this Order, the Plaintiff shall file with the Court a Summons indicating the address of the Defendant Department of Justice Federal Bureau of Prisons.

It is **FURTHER ORDERED** that service of the Summons and Complaint in this case shall be effected by the U.S. Marshal, consistent with Federal Rule of Civil Procedure 4(c)(3). Service shall be directed to the Department of Justice Federal Bureau of Prisons at the respective address indicated in the Summons. Service of process shall be perfected within forty-five (45) days of the Plaintiff filing the fully completed Summons. The Marshal shall file a return of service indicating the date and manner in which service was perfected. In the event that the Marshall is unable to perfect service within this time, notice must be filed with the Court explaining the cause of the delay.

DONE and ORDERED in chambers, at Miami, Florida, this 8th day of September 2014.



MARCIA G. COOKE
United States District Judge

Copies furnished to:

Edwin G. Torres, U.S. Magistrate Judge

U.S. Marshals Service - Civil Section

Robert Joseph Sarhan, pro se