

In The  
UNITED STATES SUPREME COURT

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ROBERTO MORENO RAMOS,  
Petitioner-Appellant,

versus

WILLIAM STEPHENS, DIRECTOR, TEXAS DEPARTMENT OF CRIMINAL  
JUSTICE, CORRECTIONAL INSTITUTIONS DIVISION,  
Respondent-Appellee.

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**On Petition for Writ of Certiorari to the  
United States Court of Appeals for the Fifth Circuit**

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**MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

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NOW COMES Petitioner ROBERTO MORENO RAMOS, by and through undersigned *pro bono* counsel, to ask leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

Mr. Moreno Ramos has previously been granted leave to proceed *in forma pauperis* by this Court in conjunction with his January 3, 2017 application for a writ of certiorari and also by the following courts:

The United States Court of Appeals for the Fifth Circuit.

The United States District Court for the Southern District of Texas.

The Texas Court of Criminal Appeals.

The 93<sup>rd</sup> District Court of Texas, Hidalgo County.

Mr. Moreno Ramos' Declaration in support of this motion is attached hereto.

Respectfully Submitted,

/s/ Danalynn Recer

Danalynn Recer  
Counsel for Roberto Moreno Ramos  
Texas Bar No. 00792935  
Gulf Region Advocacy Center  
2307 Union St.  
Houston, Texas 77007  
Office: (713)869-4722  
Fax: (713)880-3811  
Cell: (832)969-0444

**CERTIFICATE OF SERVICE**

I hereby certify that a copy of this document has been served, upon counsel for Respondent on this 14th of November, 2018, via electronic service, ECF, to Ms. Tina J. Miranda, Assistant Attorney General.

/s/ Danalynn Recer

Danalynn Recer  
Counsel for Mr. Moreno Ramos

Dated: November 14, 2018

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

I, Roberto Antonio Ramos, 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	\$ 0	\$	\$	\$
Self-employment	\$ 0	\$	\$	\$
Income from real property (such as rental income)	\$ 0	\$	\$	\$
Interest and dividends	\$ 0	\$	\$	\$
Gifts	\$ 40	\$	\$	\$
Alimony	\$ 0	\$	\$	\$
Child Support	\$ 0	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$	\$	\$
Disability (such as social security, insurance payments)	\$ 0	\$	\$	\$
Unemployment payments	\$ 0	\$	\$	\$
Public-assistance (such as welfare)	\$ 0	\$	\$	\$
Other (specify): _____	\$ 0	\$	\$	\$
<b>Total monthly income:</b>	\$ 40	\$	\$	\$

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
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			\$ _____
			\$ _____
			\$ _____

4. How much cash do you and your spouse have? \$approx. 100  
 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
	Just Fund	\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____

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 \_\_\_\_\_  
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>Ø</u>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

Name	Relationship	Age
<u>Ø</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.

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home) 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	\$ <u>Ø</u>	\$ _____
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>Ø</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ <u>Ø</u>	\$ _____
Food	\$ <u>Ø</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>0</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>Commuting</u>	\$ <u>50</u>	\$ _____
<b>Total monthly expenses:</b>	<u>40.50</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:

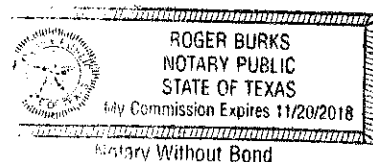
12. Provide any other information that will help explain why you cannot pay the costs of this case.

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

Executed on: Sept 6, 2018

  
(Signature)

*Roger Burks*  
*Roger Burks*  
*Notary Public*



CSINIB02/CINIB02 TEXAS DEPARTMENT OF CRIMINAL JUSTICE 09/06/18  
 TL49/AC00105 IN-FORMA-PAUPERIS DATA 09:39:24  
 TDCJ#: 00999062 SID#: 04748390 LOCATION: POLUNSKY INDIGENT DTE:  
 NAME: RAMOS, ROBERT MORENO BEGINNING PERIOD: 03/01/18  
 PREVIOUS TDCJ NUMBERS:  
 CURRENT BAL: 50.29 TOT HOLD AMT: 0.00 3MTH TOT DEP: 410.00  
 6MTH DEP: 1,075.00 6MTH AVG BAL: 540.10 6MTH AVG DEP: 179.17  
 MONTH HIGHEST BALANCE TOTAL DEPOSITS MONTH HIGHEST BALANCE TOTAL DEPOSITS  
 08/18 179.94 00.00 05/18 1,067.41 165.00  
 07/18 261.49 190.00 04/18 1,027.41 335.00  
 06/18 1,059.21 140.00 03/18 834.50 165.00  
 PROCESS DATE HOLD AMOUNT HOLD DESCRIPTION

STATE OF TEXAS COUNTY OF Polk  
 ON THIS THE 16 DAY OF September 2018, I CERTIFY THAT THIS DOCUMENT IS A TRUE,  
 COMPLETE, AND UNALTERED COPY MADE BY ME OF INFORMATION CONTAINED IN THE  
 COMPUTER DATABASE REGARDING THE OFFENDER'S ACCOUNT. NP SIG:  
 PF1-HELP PF3-END ENTER NEXT TDCJ NUMBER: \_\_\_\_\_ OR SID NUMBER: \_\_\_\_\_

*Roger Burks*  
*Roger Burks*  
 Notary Public

