

No. 18-

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IN THE  
SUPREME COURT OF THE UNITED STATES  
TIA SKINNER

*Petitioner,*

V.

STATE OF MICHIGAN

*Respondent.*

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

Petitioner Tia Skinner respectfully ask this Honorable Court for leave to process *in forma pauperis* so that she may file the accompanying Petition for Writ of Certiorari with this Court.

As Petitioner's declaration pursuant to Supreme Court rule 39(1) and 28 U.S.C. § 1746 indicates, she is indigent and is currently incarcerated in a state prison, and she is not receiving any significant income. See Exhibit #1 AFFIDAVIT OR DECLARATION. Moreover, the Juvenile Justice Clinic and undersigned counsel was appointed to represent Tia Skinner in the appellate process by St. Clair County Circuit Court Judge Daniel J. Kelly on November 5, 2013. See Exhibit #2 STIPULATED ORDER FOR DISCHARGE OF ATTORNEY AND SUBSTITUTION

OF APPELLATE COUNSEL. Judge Kelly's Order of Appointment was filed with the Michigan Court of Appeals which acknowledged that "an order substitution you as appointed counsel for defendant-appellant." See Exhibit #3 ORDER OF APPOINTMENT.

Respectfully submitted,

Kimberly Thomas (P66643)  
*Counsel of Record*  
University of Michigan Law School  
Juvenile Justice Clinic  
701 S. State St.  
Ann Arbor, MI 48109  
734-763-1193  
[kithomas@umich.edu](mailto:kithomas@umich.edu)  
[jjc-admin@umich.edu](mailto:jjc-admin@umich.edu)

Exhibit #1

AFFIDAVIT OR DECLARATION

## EXHIBIT 1

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

I, Tia Skinner, 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>32.00</u>	\$ <u>NA</u>	\$ <u>32.00</u>	\$ <u>NA</u>
Self-employment	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Income from real property (such as rental income)	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Interest and dividends	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Gifts	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Alimony	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Child Support	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Disability (such as social security, insurance payments)	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Unemployment payments	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Public-assistance (such as welfare)	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
Other (specify): _____	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
<b>Total monthly income:</b>	\$ <u>32.00</u>	\$ <u>NA</u>	\$ <u>32.00</u>	\$ <u>NA</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
Huron Valley Women's Prison	3201 Bemis Rd Ypsilanti, MI 48197	2011 - Present	\$ 32.00
			\$
			\$

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
NA	NA	NA	\$ NA
			\$
			\$

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.

Financial institution	Type of account	Amount you have	Amount your spouse has
NA	NA	\$ NA	\$ NA
		\$	\$
		\$	\$

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

☐ Home  
Value NA

☐ Other real estate  
Value NA

☐ Motor Vehicle #1  
Year, make & model NA  
Value \_\_\_\_\_

☐ Motor Vehicle #2  
Year, make & model NA  
Value \_\_\_\_\_

☐ Other assets  
Description NA  
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**

NA

\$ NA

\$ NA

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

**Name**

**Relationship**

**Age**

NA

NA

NA

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)

\$ NA

\$ NA

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

\$ 10.00

\$

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>NA</u>	\$ <u>NA</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ _____	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
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(s)	\$ _____	\$ _____
Department store(s)	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ _____
Other (specify): <u>Personal items</u>	\$ <u>25.00</u>	\$ _____
<u>deodorant, soap, shampoo, etc</u>	\$ <u>35.00</u>	\$ _____
<b>Total monthly expenses:</b>		

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? NA

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

NA

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? NA

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

NA

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

I am serving 3 Life sentences in the Michigan Corrections System. I don't even make enough money for the state to take to pay the fees.

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

Executed on: November 14, 2018

J.S.O.

(Signature)



Exhibit #2

STIPULATED ORDER FOR DISCHARGE OF  
ATTORNEY AND SUBSTITUTION OF APPELLATE COUNSEL

10/23/2013 12:18

MICROAN LEGAL SERVICES → 17346474042

NO.449 0002

From:734 647 4042

10/23/2013 11:45

#479 P.002/003

STATE OF MICHIGAN  
IN THE CIRCUIT COURT FOR THE COUNTY OF ST. CLAIR

PEOPLE OF THE STATE OF MICHIGAN;

v

Court of Appeals case no. 317892

St. Clair County case no. 10-002936-PC

TIA MARIE-MITCHELL SKINNER

STIPULATED ORDER FOR DISCHARGE OF ATTORNEY  
AND SUBSTITUTION OF APPELLATE COUNSEL

At a session of Court held in the St. Clair  
County Courthouse, 201 McMorran Blvd., Port  
Huron, MI, on the 5<sup>th</sup> day of November 2013.  
Honorable Daniel Kelly

RECEIVED  
JAY M. DEBOYER  
2013 NOV -6 AM 11:21  
ST. CLAIR COUNTY  
CLERK

NOW COME THE PARTIES and hereby agree that:

1. The University of Michigan Juvenile Justice Clinic (JJC) shall represent Tia Marie-Mitchell Skinner in the Michigan Court of Appeals case as her appellate attorneys in that the JJC has been retained as pro bono counsel to represent her as of October 19, 2013, in this matter.
2. Deborah Choly is hereby discharged as Ms. Skinner's appellate attorney, and the University of Michigan Juvenile Justice Clinic is hereby substituted as Ms. Skinner's attorney.

Deborah A. Choly date: 10/23/13 Frank Vandervort date: 10/22/13  
Deborah Choly P34766 Frank Vandervort P42938  
University of Michigan  
Juvenile Justice Clinic

Kimberly Thomas by Frank Vandervort date: 10/22/13  
Kimberly Thomas P66643 by permission  
University of Michigan  
Juvenile Justice Clinic

Daniel Kelly date: 11-5-13  
Daniel Kelly, Circuit Court Judge

IT IS SO ORDERED

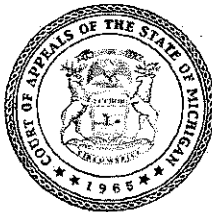
A TRUE COPY  
Jay M. DeBoyer  
County Clerk

Exhibit #3

ORDER OF APPOINTMENT

## EXHIBIT 3

WILLIAM B. MURPHY  
CHIEF JUDGE  
DAVID H. SAWYER  
CHIEF JUDGE PRO TEM  
MARK J. CAVANAGH  
KATHLEEN JANSEN  
E. THOMAS FITZGERALD  
HENRY WILLIAM SAAD  
JOEL P. HOEKSTRA  
JANE E. MARKEY  
PETER D. O'CONNELL  
WILLIAM C. WHITBECK  
MICHAEL J. TALBOT  
KURTIS T. WILDER  
PATRICK M. METER  
DONALD S. OWENS



State of Michigan  
**Court of Appeals**  
Troy Office

KIRSTEN FRANK KELLY  
CHRISTOPHER M. MURRAY  
PAT M. DONOFRIO  
KAREN FORT HOOD  
STEPHEN L. BORRELLO  
DEBORAH A. SERVITTO  
JANE M. BECKERING  
ELIZABETH L. GLEICHER  
CYNTHIA DIANE STEPHENS  
MICHAEL J. KELLY  
DOUGLAS B. SHAPIRO  
AMY RONAYNE KRAUSE  
MARK T. BOONSTRA  
MICHAEL J. RIORDAN  
JUDGES  
JEROME W. ZIMMER JR.  
CHIEF CLERK

November 12, 2013

Frank E. Vandervort  
701 S. State Street  
Ann Arbor, MI 48109

Re: **People of MI v Tia Marie-Mitchell Skinner**  
Court of Appeals No. **317892**  
Lower Court No. **10-002936-FC**

Dear Mr. Vandervort:

This Court received an order substituting you as appointed counsel for defendant-appellant in the above case. A copy of the appellate docket entries are enclosed.

Our records reflect that the complete transcript has been filed with the trial court. The appellant's brief is due 56 days from the date of the order of appointment.

If you have any questions or concerns, please contact the Troy Clerk's Office.

Very truly yours,

Angela P. DiSessa  
District Clerk

By: C. Matz  
Caitlin Matz

APD/cm

Enclosure

cc: St. Clair County Prosecutor  
Deborah Choly

DETROIT OFFICE  
CADILLAC PLACE  
3020 W. GRAND BLVD. SUITE 14-300  
DETROIT, MICHIGAN 48202-6020  
(313) 972-5678

TROY OFFICE  
COLUMBIA CENTER  
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TROY, MICHIGAN 48064-4127  
(248) 524-8700

GRAND RAPIDS OFFICE  
STATE OF MICHIGAN OFFICE BUILDING  
350 OTTAWA, N.W.  
GRAND RAPIDS, MICHIGAN 49503-2349  
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925 W. OTTAWA ST.  
P.O. BOX 30022  
LANSING, MICHIGAN 48909-7522  
(517) 373-0786