

IN THE
SUPREME COURT OF THE UNITED STATES

No.

SAMUEL RIVERA,

Petitioner/Appellant

versus

STATE OF FLORIDA,

Respondent/Appellee.

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The petitioner asks leave to file the attached petition for a writ of habeas corpus without prepayment of costs and to proceed *in forma pauperis*.

[☒] Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):


District Court of Appeal, Third 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.

PROVIDED TO
SOUTH FLORIDA RECEPTION CENTER

on 11 / 15 / 18 FOR MAILING.

BY:  S. R.
OFFICER'S INITIALS


Samuel Rivera, DC#180695
South Florida Reception Center
South Unit
13910 N.W. 41st Street
Doral, Florida 33178-3014

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

I, SAMUEL RIVERA, 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 therefore; 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 other wise.

Income source	Average monthly amount during the past 12 months		Amount expected Next month	
	You	Spouse	You	Spouse
Employment	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Self-employment	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Income from real property (such as rental income)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Interest and dividends	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Gifts (Family)	\$ 200.00	\$ N/A	\$ 0.00	\$ N/A
Alimony	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Child Support	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Retirement (such as social security, pensions annuities, insurance)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Disability (such as social security, insurance payments)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Unemployment payments	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Public assistance (such as welfare)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Other (specify): N/A	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Total monthly income	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A

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	N/A	N/A	\$ 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	N/A	N/A	\$ N/A
			\$
			\$

4. How much cash do you and your spouse have? \$ 0.00
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
N/A	\$ 0.00
	\$
	\$

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

<input checked="" type="checkbox"/> Home Value N/A	<input type="checkbox"/> Other real estate Value N/A
<input checked="" type="checkbox"/> Motor Vehicle #1 Year, make & model N/A Value	<input type="checkbox"/> Motor Vehicle #2 Year, make & model N/A Value
<input type="checkbox"/> Other assets Description N/A Value	

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$ 0.00
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0.00	\$ 0.00
Life	\$ 0.00	\$ 0.00
Health	\$ 0.00	\$ 0.00
Motor Vehicle	\$ 0.00	\$ 0.00
Other: N/A	\$ 0.00	\$ 0.00
Taxes (not deducted from wages or included in mortgage payments)		
(specify): N/A	\$ 0.00	\$ 0.00
Motor Vehicle	\$ 0.00	\$ 0.00
Credit card(s)	\$ 0.00	\$ 0.00
Department store(s)	\$ 0.00	\$ 0.00
Other:	\$ 0.00	\$ 0.00
Alimony, maintenance, and support paid to others	\$ 0.00	\$ 0.00
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Other (specify): N/A	\$ 0.00	\$ 0.00
Total monthly expenses:	\$ 0.00	\$ 0.00

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? N/A

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

N/A

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? N/A


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.

N/A

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

Executed on: November 14, 2018.


Samuel Rivera, DC#180695
South Florida Reception Center
South Unit
13910 N.W. 41st Street
Doral, Florida 33178-3014

IN THE DISTRICT COURT OF APPEAL
OF FLORIDA

THIRD DISTRICT

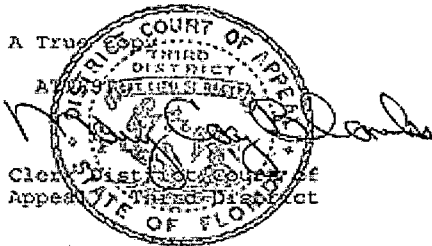
MAY 16, 2016

SAMUEL RIVERA
Appellant(s)/Petitioner(s),
vs.
THE STATE OF FLORIDA
Appellee(s)/Respondent(s),

CASE NO.: 3D16-1007

L.T. NO.: 85-25037

Appellant is deemed insolvent and may proceed in forma pauperis for
purposes of this cause.



cc: Office Of Attorney General Samuel Rivera
Miami-Dade Clerk

ts