18-6817 No. 17A1092

Supreme Court, U.S. FILED

JUN 0 1 2018

OFFICE OF THE CLERK

IN THE SUPREME COURT OF THE UNITED STATES

Michael Albert Focia

Petitioner,

V.

UNITED STATES OF AMERICA

Respondent.

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

COMES NOW, Michael Albert Focia, inpropria persona, a natural man, seeks leave to proceed in forma pauperis in the attached Petition for a Writ of Certiorari. Petitioner has previously been granted pauperis status before the U.S. District Court in the Middle District of Alabama per 18 U.S. C. § 3006A (Michael Albert Focia V.U.S.A., USDC # 2:15-Cr-00017-AKK-WC-1, and Before the Eleventh Circuit Court of Appeals (Michael Albert Focia v. U.S.A., No. 15-15643) Although unsolicited, Michael Albert Focia has given bond in the USDC Court.

Attached hereto is Petitioner's affidavit in support herein.

Dated: June 15t, 2018

ORGNAL

Submitted:

By: Michael Albert Focia Pro Per

Fed. Reg. # 15610-002

FCI-1 Oakdale

P.O. Box 5000

Oakdale, LA 71463

RECEIVED

OFFICE OF THE CLERK SUPREME COURT, U.S.

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

I, Mchael-Albert Focis, 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 expe next month	cted
	You	Spouse	You	Spouse
Employment	<u>\$O</u>	s N/A	\$	\$ N/A
Self-employment	\$	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$ <u>O</u>	\$
Interest and dividends	\$Ô	\$	\$ <i>U</i>	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child Support	\$	\$	\$ <u>6</u>	\$
Retirement (such as social security, pensions, annuities, insurance)	\$	\$	\$	\$
Disability (such as social security, insurance payments)	\$	\$	\$	\$
Unemployment payments	\$()	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	\$	\$	\$	\$
Total monthly income:	\$	s	\$	*\ <i>V</i>

Employ _e r	Address	Dates of	Gross	s monthly pay
, 1/,		Employment	\$	0
ND			\$	0
' [[\$	
B. List your spot (Gross monthly	use's employment histo y pay is before taxes or	ry for the past two years other deductions.)	, most rece	ent employer fi
Employer __	Address	Dates of	Gross	s monthly pay
		Employment	¢	^
N/W	_		 \$	<u> </u>
1			\$	0
institution.	e.g., checking or saving	\$	Amount y	our spouse ha
institution.	e.g., checking or saving	s) Amount you have	Amount y	our spouse ha
institution. Type of account (content of the desired of the desir	e.g., checking or saving	s) Amount you have	Amount y \$ \$ \$	our spouse ha
institution. Type of account (continue) 5. List the assets and ordinary h	e.g., checking or saving	s) Amount you have \$\$ \$\$ ch you own or your spous	### Amount y ### \$ ### a owns. D	our spouse ha
institution. Type of account (content of the desired of the desir	e.g., checking or saving	s) Amount you have \$\$ \$\$	### Amount y ### \$ ### a owns. D	our spouse ha
institution. ype of account (continue) List the assets and ordinary has the continue of the	e.g., checking or saving	s) Amount you have \$\$ \$\$ ch you own or your spous	Amount y \$ \$ e owns. D	our spouse ha
institution. ype of account (continue) List the assets and ordinary has been depicted by the continue of the	e.g., checking or saving	s) Amount you have \$\$ \$ ch you own or your spous Other real esta Value	Amount y \$ \$ \$ e owns. D	our spouse ha
institution. Type of account (continue) List the assets and ordinary had been value with the second continue with the s	e.g., checking or saving	s) Amount you have \$\$ \$\$ ch you own or your spous \[\text{Other real esta} \] \[\text{Value} \text{\text{\text{Value}}} \]	Amount y \$ \$ e owns. D tell A	our spouse ha
institution. Type of account (continue) List the assets and ordinary had been dependent or the following dependent or	e.g., checking or saving	s) Amount you have \$\$ \$ ch you own or your spous Other real esta Value/ Motor Vehicle for Year, make & records.	Amount y \$ \$ e owns. D tell A	our spouse ha
institution. Type of account (continue) List the assets and ordinary had been dependent or the following dependent or	e.g., checking or saving	s) Amount you have \$\$ \$ ch you own or your spous Other real esta Value/ Motor Vehicle for Year, make & re Value	Amount y \$ \$ e owns. D tell A	our spouse ha

6. State every person, busin amount owed.	ness, or organization o	wing you or your	spouse money, and the
Person owing you or your spouse money	Amount owed to yo	ou Amoun	It owed to your spouse \int_{-1}^{1}
United States	\$\$\$\$\$\$	\$! \$ \$	JA TA
7. State the persons who rely instead of names (e.g. "J.S."			ninor children, list initials
Name Winsley Focial Predey Focial	Relationship Daughter Daughte		Age 2 0 25
8. Estimate the average mont paid by your spouse. Adjannually to show the month	just any payments tha	t are made weekly	, biweekly, quarterly, or
		You	Your spouse
Rent or home-mortgage paym (include lot rented for mobile Are real estate taxes include Is property insurance include	home) ed? Yes No	\$&	s N/A
Utilities (electricity, heating fi water, sewer, and telephone)	uel,	\$	\$
Home maintenance (repairs ar	nd upkeep)	\$	\$
Food		\$	\$
Clothing		\$	
Laundry and dry-cleaning		\$	\$
Medical and dental expenses		\$\$	_ \$

	You	Your spouse
Transportation (not including motor vehicle payments)	\$	s N A
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mortg	gage 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):	\$	\$
Total monthly expenses:	\$	\$

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?
Feleuse from False imprisonment and provided compensation from the United States and the Compensation from the United States and the States and the States are the sectors. 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?YesNo
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. There is NO Lauful Money only delot notes and promises to pay. See Attached affidavit or declaration. I declare under penalty of perjury that the foregoing is true and correct. Executed on: 6th of September, 2018
_what alle spain

(Signature)