### No. 18-, 18A389

#### IN THE SUPREME COURT OF THE UNITED STATES

October Terr	m, 2018
KEITH THARPE,	Petitioner,
-V-	,
BENJAMIN FORD, Warden, Georgia Diagnostic Prison,	
	Respondent.
MOTION FOR LEAVE TO PROC	CEED IN FORMA PAUPERIS

Petitioner, KEITH THARPE, by and through his undersigned counsel, asks leave to file the attached Petition for Writ of Certiorari to the Eleventh Circuit Court of Appeals without prepayment of fees and costs, and to proceed *in forma pauperis*, pursuant to Rule 39 of the Rules of this Court.

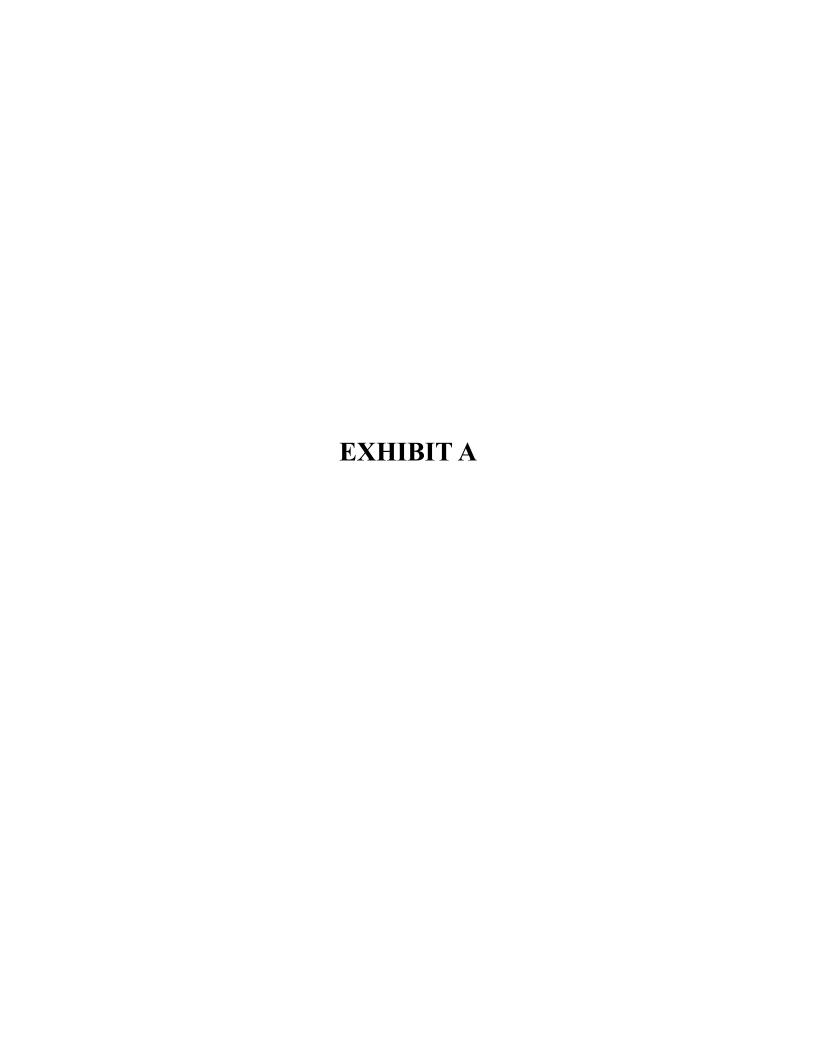
Petitioner's Affidavit in support of this motion is attached hereto as Exhibit A. This 21st day of November, 2017.

\_\_\_\_\_

BRIAN S. KAMMER MARCIA A. WIDDER Georgia Resource Center 303 Elizabeth Street, NE Atlanta, Georgia 30307 (404) 222-9202

Bill

COUNSEL FOR MR. THARPE



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

I, KEITH THARPE, 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		e monthly amo t 12 months	unt during	Amount expenses mext month	cted
		You	Spouse	You	Spouse
Employment	N/A	\$	\$	\$	\$
Self-employment	N/A	\$	\$	\$	\$
Income from real (such as rental i	<b>property</b> N/A <b>ncome)</b>	\$	\$	\$	\$
interest and divid	ends N/A	\$	\$	\$	\$
Gifts		\$ 175-hw	\$	\$ 175.20	\$
Alimony	N/A	\$	\$	\$	\$
Child Support	N/A	\$	\$	\$	\$
Retirement (such security, pension annuities, insurar	<b>S,</b> N/A	\$	\$	\$	\$
Disability (such as security, insurance		\$	\$	\$	\$
Unemployment pa	yments N/A	\$	\$	\$	\$
Public-assistance (such as welfare)		\$	\$	\$	\$
Other (specify):	N/A	\$	\$	\$	\$
Total monti	nly income:	\$ 175-2w	\$	\$ 175 200	\$_

Employer			\$
3. List your spous (Gross monthly)		ry for the past two years	, most recent employer f
Employer	Address	Dates of Employment	Gross monthly pay
			\$
	do you and your spous		ints or in any other finen
Below, state any institution.	money you or your	spouse have in bank accord	Amount your spouse ha
Below, state any institution.	money you or your	spouse have in bank accord	Amount your spouse ha
Below, state any institution.  Financial institution.  List the assets, and ordinary hou	on Type of account	spouse have in bank accord  Amount you have  \$ \$ \$ ch you own or your spouse  N/A	Amount your spouse has \$
Below, state any institution.  inancial institution.  List the assets, and ordinary hou	and their values, which sehold furnishings.	spouse have in bank accord  Amount you have  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount your spouse has \$ssse owns. Do not list clother the second
Below, state any institution.  Inancial institution.  List the assets, and ordinary hould be added to the state of the sta	and their values, which asehold furnishings.	spouse have in bank accord  Amount you have  \$ \$ \$ ch you own or your spouse  N/A  Other real estate  Value  Motor Vehicle #	Amount your spouse has \$

6. State every person, bus amount owed. N/A	iness, or organization	owing you or your sp	ouse money, and the		
Person owing you or your spouse money	Amount owed to y	ou Amount o	wed to your spouse		
	\$	\$			
<del> </del>	\$	\$\$			
	\$	<b>\$</b>	\$		
7. State the persons who rel	y on you or your spouse	for support. N/A			
Name	Relationship		\ge		
8. Estimate the average mon paid by your spouse. Ac annually to show the mon	ljust any payments tha	l your family. Show so t are made weekly, bi	eparately the amounts iweekly, quarterly, or Your spouse		
Rent or home-mortgage payr (include lot rented for mobile Are real estate taxes includ Is property insurance includ	e home) led? 🔲 Yes 🖂 No	\$	\$		
Utilities (electricity, heating swater, sewer, and telephone)		\$	\$		
Home maintenance (repairs a	nd upkeep) N/A	\$	\$		
Food	MA	\$	<b>\$</b>		
Clothing	N/A	\$	\$		
Laundry and dry-cleaning	N/A	\$	\$		
Modicel and dentel expenses		5.00/per sick call	e		

. 8

	You	Your spouse
Transportation (not including motor vehicle payments)	N/A <b>\$</b>	\$
Recreation, entertainment, newspapers, magazines, etc.	N/A\$	<u> </u>
Insurance (not deducted from wages or included in mor	tgage payments)	N/A
Homeowner's or renter's	\$	
Life	\$	
Health	\$	
Motor Vehicle	\$	
Other:	\$	\$
Taxes (not deducted from wages or included in mortgag	e paymenta) N//	<b>,</b>
(specify):	\$	\$
Installment payments N/A		
Motor Vehicle	\$	\$
Credit card(s)	\$	
Department store(s)	\$	
Other:	\$	\$
Alimony, maintenance, and support paid to others N/A	\$	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement) N/A	\$	. \$
Other (specify): 50PE SMACES	\$ 175200	\$
Total monthly expenses:	\$ 175200	_ \$

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? $\square$ Yes $\square$ 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 y	res, 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 AM A PRISONER UNDER DEATH SENTENCE
I de	clare under penalty of perjury that the foregoing is true and correct.
Exe	November 15 , 20 18
	Will There (Signature)
	(Signature)

# THIS FORM IS TO BE COMPLETED ONLY BY AN AUTHORIZED INDIVIDUAL AUTH

	CERTIFICATION
•	I hereby certify that the Plaintiff herein, Keith Thorse 173325, has a current balance of \$ 90 and on account at the GEORGIA DIAGNOSTIC & CLASSIFICATION PRISON the institution where confined.
	I further certify that Plaintiff likewise has the following securities according to the records of
	said institution <u>NA</u>
	Sarah Barber 11/15/18  Authorized Officer of the Institution Date

Morts Pleaseattach at composition or somer summate accounted the last size

THARPE, KEITH

ITH Printed by:

DAILDEN, ......

GDC ID: 173325

Spendable Amount \$90.64 Reserved Amount \$10.00 Receipts On Hold \$0.00 Funds Balance \$100.64 **Obligations/Court Charges** 

\$0.00

	N	E CONTRACTOR DE LA CONT		
			RECEIPTS	The state of the s
Receipt Date	Transaction ID	Receipt Type	Receipt Details	Receipt Amount
11/09/2018	18754783	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 92902597	\$100.00
10/19/2018	18680665	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 92012774	\$100.00
10/01/2018	18614410	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 91202525	\$100.00
09/12/2018	18554064	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 90486019	\$119.00
07/29/2018	18391697	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 88607121	\$250.00
06/23/2018	18266486	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 87217210	\$250.00
06/15/2018	18238429	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 86929702	\$25.25
05/20/2018	18145723	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 85934977	\$250.00
05/02/2018	18081996	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 85224680	\$100.00
04/11/2018	18006335	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 84437738	\$50.00
04/05/2018	17984856	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 84203349	\$200.00
03/21/2018	17929437	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 83565998	\$100.00
03/11/2018	17892470	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 83173925	\$100.00
02/21/2018	17819869	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 82314676	\$100.00
02/08/2018	17775707	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 81842022	\$100.00
01/23/2018	17718426	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 81180376	\$100.00
01/11/2018	17678011	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 80779510	\$100.00
12/29/2017	17634002	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 80271956	\$100.00
12/16/2017	17593392	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 79785151	\$45.00
12/13/2017	17584050	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 79660009	\$25.25
12/07/2017	17563159	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 79423868	\$50.00
11/25/2017	17519326	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 78960355	\$50.00
11/18/2017	17496209	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 78696298	\$50.00
11/07/2017	17460330	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 78295402	\$50.00
10/27/2017	17419966	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77860234	\$50.00
10/27/2017	17419569	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77850470	\$50.75
10/20/2017	17396218	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77613839	\$50.00
10/15/2017	17378611	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 77466992	\$25.00
09/28/2017	17318152	JPAY DEPOSIT RECEIPT	JPAY - HANUSZ, JOHN - 76815920	\$50.00
09/10/2017	17260415	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 76236181	\$50.00
08/27/2017	17212403	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 75735069	\$50.00
07/14/2017	17061431	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 74246475	\$200.00
06/13/2017	16955317	JPAY DEPOSIT RECEIPT	JPAY - POPE, AUDREY - 73184841	\$25.00

## THARPE, KEIIIn

GDC ID: 173325

Receipt Date	Transaction ID	Receipt Type	Receipt Details	Receipt Amount
04/10/2009	6119628	BANK OF AMERICA RECEIPT	BOA-12561522 - 250417	\$49.25
04/07/2009	6106711	BANK OF AMERICA RECEIPT	BOA-97870546 - 241883	\$99.25
03/20/2009	6043490	BANK OF AMERICA RECEIPT	BOA-39471793 - 206336	\$54.25
03/19/2009	6041313	BANK OF AMERICA RECEIPT	BOA-12559788 - 205516	\$36.00
03/19/2009	5999648	JPAY DEPOSIT RECEIPT	JPAY - DE LELLIS, FRANCESCO - 4769417	\$20.00
03/10/2009	5990351	BANK OF AMERICA RECEIPT	BOA-97870438 - 171182	\$99.25
03/07/2009	5885967	BANK OF AMERICA RECEIPT	00 0000	\$36.00
02/06/2009	5869738	BANK OF AMERICA RECEIPT	1 2 1/1900123 12 20000	\$99.25
( <del></del>	5805733	BANK OF AMERICA RECEIPT		\$99.25
01/15/2009	5729666	CONSOLIDATE BANKING	GA DIAG CLASS PRISON - 44989	\$119.99
01/08/2009	5729000	CONVERSION	GA DIAG CLASS PRISON - 44989	\$10.00
01/08/2009	5729665	CONSOLIDATE BANKING CONVERSION	GA DIAG CLASS FRISCIN - 44800	

WITHDRAWALS							
Date	Request Date	Location Paid	Withdrawal Type	Payable To	Detail	Amount	Check No
11/14/2018	,	CENTRAL ACCT- OFFENDER TRUST	WITHDRAWAL FOR PHONE CREDITS	GA DIAG CLASS PRISON	TELEPHONE MINUTES PURCHASE	\$40.00	
11/14/2018		CENTRAL ACCT- OFFENDER TRUST	STORE PURCHASE	GA DIAG CLASS PRISON	STORE PURCHASE	\$12.27	.=0.440
11/06/2018		CENTRAL ACCT- OFFENDER TRUST	WITHDRAWAL FOR JPAY KIOSK	JPAY CORPORATION	KIOSK PURCHASE @ GA DIAG CLASS PRISON - JPAY JPAY DOLLAR PURCHASE	\$7.00	170449
11/05/2018		CENTRAL ACCT- OFFENDER TRUST	WITHDRAWAL FOR PHONE CREDITS	GA DIAG CLASS PRISON	TELEPHONE MINUTES PURCHASE	\$10.00	
11/05/2018		CENTRAL ACCT- OFFENDER TRUST	STORE PURCHASE	GA DIAG CLASS PRISON	STORE PURCHASE	\$31.01	
11/01/2018		CENTRAL ACCT- OFFENDER TRUST	WITHDRAWAL FOR OBLIGATION	GEORGIA DEPARTMENT OF CORRECTIONS	Monthly Processing Fee 11/2018	\$1.00	170148
10/29/2018	3	CENTRAL ACCT- OFFENDER TRUST	WITHDRAWAL FOR PHONE CREDITS	GA DIAG CLASS PRISON	TELEPHONE MINUTES PURCHASE	\$20.00	
10/23/2018	3	CENTRAL ACCT- OFFENDER TRUST	WITHDRAWAL FOR PHONE CREDITS	GA DIAG CLASS PRISON	TELEPHONE MINUTES PURCHASE	\$10.00	
10/23/2018	3	CENTRAL ACCT- OFFENDER TRUST	STORE PURCHASE	GA DIAG CLASS PRISON	STORE PURCHASE	\$30.76	2010000116
10/17/201	8	CENTRAL ACCT- OFFENDER TRUST	WITHDRAWAL FOR JPAY KIOSK	JPAY CORPORATION	I KIOSK PURCHASE @ GA DIAG CLASS PRISON - JPAY JPAY DOLLAR PURCHASE	\$7.00	169798

### No. 18- , 18A389

### IN THE SUPREME COURT OF THE UNITED STATES

October Term, 2018	
KEITH THARPE,	
	Petitioner,
-V-	
BENJAMIN FORD, Warden,	
Georgia Diagnostic Prison,	Respondent.
CERTIFICATE OF SERVICE	

This is to certify that I have served a copy of the foregoing document this day by electronic transmission and/or U.S. Mail, on counsel for Respondent at the following address:

Sabrina Graham, Esq. Senior Assistant Attorney General sgraham@law.ga.gov 132 State Judicial Building 40 Capitol Square, S.W. Atlanta, Georgia 30334-1300

This 21st day of November, 2018.

Attorney

Bish