

No. **18-6899**

I N T H E
SUPREME COURT OF THE UNITED STATES
October Term, 2018

ORIGINAL

Supreme Court, U.S. FILED NOV 20 2018 OFFICE OF THE CLERK

JOHN URANGA III,

Petitioner

-vs-

LORIE DAVIS, Director,
Texas Department of Criminal Justice,
Correctional Institutions Division,

Respondent

PETITION FOR WRIT OF CERTIORARI
T O T H E
UNITED STATES COURT OF APPEALS
FOR THE FIFTH CIRCUIT

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

JOHN URANGA III, pro se
Robertson Unit, TDCJ No. 1500003
12071 FM 3522
Abilene, Texas 79601-8799

Petitioner

No. _____

I N T H E
SUPREME COURT OF THE UNITED STATES
October Term, 2018

JOHN URANGA III, Petitioner

-vs-

LORIE DAVIS, Director,
Texas Department of Criminal Justice,
Correctional Institutions Division,
Respondent,

On Petition for Writ of Certiorari
t o t h e
United States Court of Appeals
for the Fifth Circuit

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The petitioner respectfully asks for leave to file the attached petition for writ of certiorari, without prepayment of costs, and to proceed in forma pauperis.

Petitioner has previously been granted leave to proceed as a pauper in the United States Court of Appeals for the Fifth Circuit, the Court of Appeals for the Sixth Appellate District of Texas; and the 78th Judicial District Court of Wichita County, Texas. Petitioner has attached, hereto, his declaration in support of this motion.

Most Respectfully Submitted,

JOHN URANGA III, Petitioner
Robertson Unit, TDCJ No. 1500003
12071 FM 3522
Abilene, Texas 79601-8799

INMATE'S DECLARATION AND CERTIFICATE OF SERVICE

I hereby declare and certify, that on the TWENTIETH day of NOVEMBER, 2018, I forwarded the attached MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS, to the following:

Office of the Clerk
Supreme Court of the United States
1 First Street N.E.
Washington, DC 20543

I further declare and certify, that on the TWENTIETH day of NOVEMBER, 2018, I served a true and correct carbon copy of same on the following attorney:

Mr. Scott A. Keller, Esq.
Solicitor General of Texas
P.O. Box 12548 -- Capitol Station
Austin, Texas 78711-2548

Pursuant to 28 U.S.C. § 1746(2), and as required by Rule 29 of the Supreme Court's Rules, I declare under penalty of perjury that the original and carbon copy declared above, were mailed to the persons identified above, by regular U.S. Postal Service first class mail, postage prepaid, by depositing same into the prison's internal Legal Mail System under the Prison Mailbox Rule, enclosed in a properly addressed envelope.

DATED: NOVEMBER 2, 2018

JOHN URANGA III, Petitioner

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

I, **John Uranga, III**, 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	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Self-employment IN PRISON	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Income from real property (such as rental income)	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Interest and dividends	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Gifts PRISON TRUST FUND	\$50.00	\$ NONE	\$50.00	\$ NONE
Alimony	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Child Support	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Retirement (such as social security, pensions, annuities, insurance)	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Disability (such as social security, insurance payments)	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Unemployment payments	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Public-assistance (such as welfare)	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Other (specify):	\$ NONE	\$ NONE	\$ NONE	\$ NONE
Total monthly income:	\$50.00	\$ NONE	\$50.00	\$ NONE

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.) **NONE**

Employer	Address	Dates of Employment	Gross monthly pay
I have been continuously incarcerated since November 2006.			\$
			\$
			\$

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
I am NOT married and have NO spouse/wife.			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ **82.43**
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
Prison Inmate Trust Fund		\$ 82.43	\$ N/A
		\$	\$
		\$	\$

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings. **NONE WHATSOEVER**

<input type="checkbox"/> Home	NONE	<input type="checkbox"/> Other real estate	NONE
Value		Value	

<input type="checkbox"/> Motor Vehicle #1	NONE	<input type="checkbox"/> Motor Vehicle #2	NONE
Year, make & model		Year, make & model	
Value		Value	

<input type="checkbox"/> Other assets	NONE
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
NONE	\$	\$
	\$	\$
	\$	\$

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

Name	Relationship	Age
NONE		

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)	\$ NONE	\$ N/A
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		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ NONE	\$ N/A
Home maintenance (repairs and upkeep)	\$ NONE	\$ N/A
Food	\$ 30.00	\$ N/A
Clothing	\$ NONE	\$ N/A
Laundry and dry-cleaning	\$ 5.00	\$ N/A
Medical and dental expenses	\$ 20.00	\$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ NONE	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$12.00	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ NONE	\$ N/A
Life	\$ NONE	\$ N/A
Health	\$ NONE	\$ N/A
Motor Vehicle	\$ NONE	\$ N/A
Other:	\$ NONE	\$ N/A
Taxes (not deducted from wages or included in mortgage payments)		
(specify): State Sales Tax	\$ 6.00	\$ N/A
Installment payments		
Motor Vehicle	\$ NONE	\$ N/A
Credit card(s)	\$ NONE	\$ N/A
Department store(s)	\$ NONE	\$ N/A
Other:	\$ NONE	\$ N/A
Alimony, maintenance, and support paid to others	\$ NONE	\$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ NONE	\$ N/A
Other (specify):	\$ NONE	\$ N/A
Total monthly expenses:	\$ 73.00	\$ N/A

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? \$150.00

If yes, state the person's name, address, and telephone number: Inmate paralegal/typist

Gordon R. Simmonds
Robertson Unit, TDCJ No. 932489
12071 FM 3522
Abilene, Texas 79601-8799

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

I am a prisoner of the State of Texas, and have been in continuous incarceration since November 2006.

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

Executed on: This 20th day of November , 2018

(Signature)

Urranga John III