

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

ROBERTO GIL — PETITIONER

VS.

STATE OF FLORIDA — RESPONDENT

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

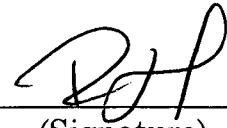
The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

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

Miami-Dade County Courthouse, Eleventh Judicial Circuit, 1351 N.W. 12th St., Miami, FL 33125; District Court of Appeal, Third District, Florida, 2001 SW 117th Avenue, Miami, FL 33175

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.


(Signature)

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

I, Roberto Gil, 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 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 biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes of otherwise.

Income source expected	Average monthly amount during The past 12 months		Amount next month	
	You Spouse		You Spouse	
Employment	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Self-employment	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Income from real property (Such as rental income)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Retirement (such as social Security, pensions, Annuities, insurance)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Disability (such as social Security, insurance payments)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Other (specify):	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Total monthly income:	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

Employer monthly pay	Address	Dates of Employment	Gross
None _____	_____	None _____	\$ 0
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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 monthly pay	Address	Dates of Employment	Gross
None _____	Incarcerated _____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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
None _____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____

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

Home
Value _____ None _____

Other real estate
Value _____ None _____

Motor Vehicle #1
Year, make & model _____ Value _____

Motor Vehicle #2
Year, make & model _____ Value _____

Other assets

Description None

Value _____

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

**Person owing you or
spouse your spouse money**

	Amount owed to you	Amount owed to your spouse
<u>None</u>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

Name	Relationship	Age
<u>None</u>	_____	_____
_____	_____	_____
_____	_____	_____

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 of home-mortgage payment \$ 0 \$ _____

(Include lot rented for mobile home)

Are real estate taxes included? Yes No

Is property insurance included? Yes No

Utilities (electricity, heating fuel,
Water, sewer, and telephone) \$ 0 \$ _____

Home maintenance (repairs and upkeep) \$ 0 \$ _____

Food \$ 0 \$ _____

Clothing \$ 0 \$ _____

Laundry and dry-cleaning	\$ <u>0</u>	\$ _____
Medical and dental expenses	\$ <u>0</u>	\$ _____
	You	Your Spouse

Transportation (not including motor vehicle payments) \$ 0 \$ _____

Recreation, entertainment, newspapers, magazines, etc. \$ 0 \$ _____

Insurance (not deducted from wages or included in mortgage payments)

Homeowner's or renter's	\$ <u>0</u>	\$ _____
Life	\$ <u>0</u>	\$ _____
Health	\$ <u>0</u>	\$ _____
Motor Vehicle	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____

Taxes (not deducted from wages or included in mortgage payments)
(Specify): _____

Installment payments

Motor Vehicle	\$ <u>0</u>	\$ _____
Credit card(s)	\$ <u>0</u>	\$ _____
Department store(s)	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____

Alimony, maintenance, and support paid to others \$ 0 \$ _____

Regular expenses for operation of business, profession,
or farm (attach detailed statement) \$ 0 \$ _____

Other (specify): _____ \$ ___ 0 ___ \$ _____

Total monthly expenses: \$ ___ 0 ___ \$ _____

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? _____

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 compensation of this form?

Yes No

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.

I have been incarcerated since 2012.

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

Executed on: 10 December, 2018


(Signature)