

18-7598 ORIGINAL

No. _____

FILED

NOV 23 2013

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

CAROL JOHNSON MORAN, FOLLY ⁷⁶⁵⁴⁷⁻⁰⁹⁰ — PETITIONER
(Your Name)

VS.

UNITED STATES OF AMERICA — RESPONDENT(S)

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*.

Please check the appropriate boxes:

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

NO. 12-5104, THE MORAN (U.S. CIRCUIT COURT - WASHINGTON, DC); NO. 14-50875;
MORAN v. U.S.A., JAN. 30, 2015 IFP GRANTED (5th Cir. COA's); NO. 97-CR-10, 18th 3001(A)

☐ 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.

☐ Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

☐ The appointment was made under the following provision of law: _____, or

☐ a copy of the order of appointment is appended.

Carol Johnson Moran Folly ⁷⁶⁵⁴⁷⁻⁰⁹⁰
(Signature)

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

I, Cara Towne Moss, Dg. # 76547⁻⁶⁸⁰, 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	\$ -0-	\$	\$ -0-	\$
Self-employment	\$ -0-	\$	\$ -0-	\$
Income from real property (such as rental income)	\$ -0-	\$	\$ -0-	\$
Interest and dividends	\$ -0-	\$	\$ -0-	\$
Gifts	\$ -0-	\$	\$ -0-	\$
Alimony	\$ -0-	\$	\$ -0-	\$
Child Support	\$ -0-	\$	\$ -0-	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ -0-	\$	\$ -0-	\$
Disability (such as social security, insurance payments)	\$ -0-	\$	\$ -0-	\$
Unemployment payments	\$ -0-	\$	\$ -0-	\$
Public-assistance (such as welfare)	\$ -0-	\$	\$ -0-	\$
Other (specify): <u>REBUILT 1109-1111</u> <u>1001 E. 11th Ave</u> <u>Midland, Texas</u>	\$ 0	\$	\$ -0-	\$
Total monthly income:	\$ -0-	\$	\$ -0-	\$

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
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
N/A	\$ 0	\$ N/A
N/A	\$ 0	\$ N/A
N/A	\$ 0	\$ N/A

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

<input type="checkbox"/> Home Value <u>UNKNOWN (CONSTRUCTION 9 yrs.)</u>	<input checked="" type="checkbox"/> Other real estate Value <u>APPROX. 25 LOTS AND 3 COMMERCIAL BLDGS</u>
<input type="checkbox"/> Motor Vehicle #1 Year, make & model <u>'99 D'Elegance Camaro</u> Value <u>UNKNOWN</u>	<input type="checkbox"/> Motor Vehicle #2 Year, make & model _____ Value _____
<input checked="" type="checkbox"/> Other assets Description <u>APPROX. 25 LOTS: RE: TP13106</u> Value <u>UNKNOWN</u>	

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
<u>Sec. of Treasury (Wash. D.C.)</u>	<u>\$ Billions or millions</u>	<u>\$ N/A</u>
<u>BP America Prod. Co.</u>	<u>\$ Billions or millions</u>	<u>\$ N/A</u>
<u>City of Meriden, Tr.</u>	<u>\$ Billions or millions</u>	<u>\$ N/A</u>

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

Name	Relationship	Age
<u>CAROL JENNIFER MORRIS</u>	<u>SELF</u>	<u>28</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 or home-mortgage payment (include lot rented for mobile home)	<u>\$ -0-</u>	<u>\$</u>
Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	<u>\$ 750 approx.</u>	<u>\$</u>
Home maintenance (repairs and upkeep) <u>WATER RENOVATION; AND RENOVATING</u>	<u>2.5 mil. \$ UNKNOWN</u>	<u>\$</u>
Food	<u>\$ 400 ^{no} approx.</u>	<u>\$</u>
Clothing	<u>\$ UNKNOWN</u>	<u>\$</u>
Laundry and dry-cleaning	<u>\$ 200. ^{no}</u>	<u>\$</u>
Medical and dental expenses <u>(WAS HARMONIZ FOR HEP-C LASER EYE SURGERY DENTAL EXPENSES: IMPLANTS! GOLD CUPS</u>	<u>\$ 30,000 approx.</u>	<u>\$</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ _____	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>100 no. appl.</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>400.00 no</u>	\$ _____
Life	\$ <u>25.00 appl.</u>	\$ _____
Health	\$ <u>8,000 no</u>	\$ _____
Motor Vehicle	\$ <u>80-150 no</u>	\$ _____
Other: <u>BACK INJURY</u>	\$ <u>0</u>	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0-</u>	\$ _____
Installment payments		
Motor Vehicle <u>NEW HAW CAR</u>	\$ <u>0-</u>	\$ _____
Credit card(s)	\$ <u>2,000</u>	\$ _____
Department store(s)	\$ <u>200 no. appl.</u>	\$ _____
Other: <u>COMMERCIAL CREDIT CARDS</u>	\$ <u>3,000</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>UNKNOWN</u>	\$ _____
<u>NEW TO REBUILD: 1109-1111 E. LINCOLN AVE., HOUSTON, TX</u>		
Other (specify): <u>NEW RENOVATING (PROPERTY OWNERS)</u>	\$ <u>UNKNOWN</u>	\$ _____
Total monthly expenses:	\$ <u>0</u>	\$ _____

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? PRO SE

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? PRO SE

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 IN CARCERATION FOR OVER 9 YEARS, THIS TIME, WITHOUT PAYMENT OF JUST COMPENSATION FROM THE THEFT OF MY MURDER AND PREPARING

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

Executed on: December 28th, 2018am

Paul Jerome Harris
(Signature)