

No. 18-8142

IN THE  
SUPREME COURT OF THE UNITED STATES

Michael Williamson-PETITIONER

VS.

<sup>①</sup> Karen Slusher, et al.-RESPONDENT(S)

ORIGINAL

Supreme Court, U.S.  
FILED

JAN 02 2019

OFFICE OF THE CLERK

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

Cuyahoga County Court of Appeals; Ohio Supreme Court; U.S. District Court  
(N.D. Ohio); U.S. 6th Circuit Court of Appeals.

  
(Signature)

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

I, Michael Williamson, 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.

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
Employment	\$ 0	\$ (None)	\$ 0	\$ (None)
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>Prison Pay</u>	\$ 18.00	\$ -	\$ 18.00	\$ -
<b>Total monthly income:</b>	<b>\$ 18.00</b>	<b>\$ -</b>	<b>\$ 18.00</b>	<b>\$ -</b>

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
Ohio Department of Rehabilitation & Corrections	1001 Oliveburg Rd. Mansfield, Ohio 44905	1-6-2014- Present	\$ 18.00 \$ \$

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.)

None

Employer	Address	Dates of Employment	Gross monthly pay
-0-	-0-	-0-	\$ -0-
-0-	-0-	-0-	\$ -0-
-0-	-0-	-0-	\$ -0-

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.

None

Financial institution	Type of account	Amount you have	Amount your spouse has
-0-	-0-	\$ -0-	\$ -0-
-0-	-0-	\$ -0-	\$ -0-
-0-	-0-	\$ -0-	\$ -0-

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

None

Home

Value N/A

Other real estate

Value N/A

Motor Vehicle #1

Year, make & model N/A

Value N/A

Motor Vehicle #2

Year, make & model N/A

Value N/A

Other assets

Description None

Value -0-

6. State every person, business, or organization owing you or your spouse money, and the amount owed. None

<b>Person owing you or your spouse money</b>	<b>Amount owed to you</b>	<b>Amount owed to your spouse</b>
None	\$ -0-	\$ -0-
None	\$ -0-	\$ -0-
	\$ _____	\$ _____
None	\$ -0-	\$ -0-

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

<b>Name</b>	<b>Relationship</b>	<b>Age</b>
N/A	N/A	N/A
N/A	N/A	N/A
N/A	N/A	N/A

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.

	<b>You</b>	<b>Your spouse (No Spouse)</b>
Rent or home-mortgage payment (include lot rented for mobile home)	\$ -0-	\$ -0-
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)	\$ -0-	\$ -0-
Home maintenance (repairs and upkeep)	\$ -0-	\$ -0-
Food	\$ -0-	\$ -0-
Clothing	\$ -0-	\$ -0-
Laundry and dry-cleaning	\$ -0-	\$ -0-
Medical and dental expenses	\$ -0-	\$ -0-

	<b>You</b>	<b>Your spouse ( No Spouse )</b>
Transportation (not including motor vehicle payments)	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Life	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Health	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Motor Vehicle	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Other: <u>              -0-      </u>	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>      None      </u>	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Installment payments		
Motor Vehicle	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Credit card(s)	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Department store(s)	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Other: <u>              -0-      </u>	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Alimony, maintenance, and support paid to others	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
Other (specify): <u>      None      </u>	\$ <u>      -0-      </u>	\$ <u>      -0-      </u>
<b>Total monthly expenses:</b>	<b>\$ <u>      -0-      </u></b>	<b>\$ <u>      -0-      </u></b>

9. Do you expect any major changes to your monthly income or expences or in your assete or liabilities during the next 12 months? NO

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? NO.

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? NO.

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

Michael Williams  
(Signature)