

No. \_\_\_\_\_

**18-8154**

IN THE

SUPREME COURT OF THE UNITED STATES

ORIGINAL

**DIONDRÉ ROMERO -- PETITIONER**

VS.

FILED

FEB 22 2019

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

**DARREL VANNOY, WARDEN -- 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*.

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

United States District Court For The Western District Of Louisiana, Lafayette Division

United States Court Of Appeals For The Fifth Circuit

☐ 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, DIONDRÉ ROMERO, 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	\$ N/A	\$ 0	\$ N/A
Self-employment	\$ 0	\$ N/A	\$ 0	\$ N/A
Income from real property (such as rental income)	\$ 0	\$ N/A	\$ 0	\$ N/A
Interest and dividends	\$ 0	\$ N/A	\$ 0	\$ N/A
Gifts	\$ 0	\$ N/A	\$ 0	\$ N/A
Alimony	\$ 0	\$ N/A	\$ 0	\$ N/A
Child Support	\$ 0	\$ N/A	\$ 0	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ N/A	\$ 0	\$ N/A
Disability (such as social security, insurance payments)	\$ 0	\$ N/A	\$ 0	\$ N/A
Unemployment payments	\$ 0	\$ N/A	\$ 0	\$ N/A
Public-assistance (such as welfare)	\$ 0	\$ N/A	\$ 0	\$ N/A
Other (specify):	\$ 0	\$ N/A	\$ 0	\$ N/A
<b>Total monthly income:</b>	<b>\$ 0</b>	<b>\$ N/A</b>	<b>\$ 0</b>	<b>\$ N/A</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
None	None	None	\$ None
			\$
			\$

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.

Financial institution	Type of account	Amount you have	Amount your spouse has
None	None	\$ 0	\$ 0
		\$	\$
		\$	\$

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	<input type="checkbox"/> Other real estate
Value	Value

<input type="checkbox"/> Motor Vehicle #1	<input type="checkbox"/> Motor Vehicle #2
Year, make & model	Year, make & model
Value	Value

☐ Other assets  
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	\$ 0	\$ 0
	\$	\$
	\$	\$

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 (included lot rented for mobile home) Are real estate taxes include? [ ] Yes [ ] No Is property insurance included? [ ] Yes [ ] No	\$ 0	\$ N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 0	\$ N/A
Home maintenance (repairs and upkeep)	\$ 0	\$ N/A
Food	\$ 0	\$ N/A
Clothing	\$ 0	\$ N/A
Laundry and dry-cleaning	\$ 0	\$ N/A
Medical and dental expenses	\$ 0	\$ N/A

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ 0 _____	\$ N/A _____
Recreation, entertainment, newspapers, magazines, etc.	\$ 0 _____	\$ N/A _____
<b>Insurance (not deducted from wages or included in mortgage payments)</b>		
Homeowner's or renter's	\$ 0 _____	\$ N/A _____
Life	\$ 0 _____	\$ N/A _____
Health	\$ 0 _____	\$ N/A _____
Motor Vehicle	\$ 0 _____	\$ N/A _____
Other: _____	\$ 0 _____	\$ N/A _____
<b>Taxes (not deducted from wages or included in mortgage payments)</b>		
(specify): _____	\$ 0 _____	\$ N/A _____
<b>Installment payments</b>		
Motor Vehicle	\$ 0 _____	\$ N/A _____
Credit card(s)	\$ 0 _____	\$ N/A _____
Department store(s)	\$ 0 _____	\$ N/A _____
Other: _____	\$ 0 _____	\$ N/A _____
Alimony, maintenance, and support paid to others	\$ 0 _____	\$ N/A _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0 _____	\$ N/A _____
Other (specify): _____	\$ 0 _____	\$ N/A _____
<b>Total monthly expense:</b>	\$ 0 _____	\$ N/A _____

9. Do you expect any major changes to your monthly income or expense 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 completion 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.

Incarcerated, no source of income at all.

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

Executed on February 11, 2019.

(Signature) Diondre Romero  
DIONDRÉ ROMERO