

18-8431

IN THE
THE SUPREME COURT OF THE UNITED STATES

DAVID K. BREWSTER,

Petitioner,

v.

STATE OF FLORIDA,

Respondent.

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Case No.

ORIGINAL

Supreme Court, U.S.
FILED

MAR 11 2019

OFFICE OF THE CLERK

PETITIONER'S MOTION TO PROCEED IN FORMA PAUPERIS

COMES NOW the petitioner, David K. Brewster, *pro se*, and moves the Court to allow him to proceed in forma pauperis in his petition for a writ of certiorari to the Florida Supreme Court and states in support thereof the following:

1. The appellant is indigent as demonstrated by his previous filings in this matter in the District Court of Appeal of the State of Florida Fourth District and The Florida Supreme Court as shown in Exhibits A and B respectively, attached hereto and incorporated herein.

2. Filed herewith and incorporated herein is an Affidavit Accompanying Motion for Permission to Appeal In Forma Pauperis.

RECEIVED

MAR 14 2019

OFFICE OF THE CLERK
SUPREME COURT, U.S.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'David K. Brewster', written over a horizontal line.

DAVID K. BREWSTER, *pro se*

2844 Stoneway Lane, Apt. D

Fort Pierce, Fl 34982

772-801-1652

772-828-4729 (fax)

David.K.Brewster.L70@alumni.upenn.edu

IN THE DISTRICT COURT OF APPEAL OF THE STATE OF FLORIDA
FOURTH DISTRICT, 110 SOUTH TAMARIND AVENUE, WEST PALM BEACH, FL 33401

July 13, 2018

CASE NO.: 4D17-1980

L.T. No.: 2002CF001483A
2002CF1339A
2002CF720A

DAVID KELLY BREWSTER

v. STATE OF FLORIDA

Appellant / Petitioner(s)

Appellee / Respondent(s)

BY ORDER OF THE COURT:

CLERK'S CERTIFICATE OF INDIGENCY

The Clerk of the District Court of Appeal, Fourth District, has received for filing a Motion to be Relieved of Costs, an Affidavit of Indigency, and a Certificate of Counsel (if required), and issues this Certificate of Indigency in accordance with section 57.081(1), Florida Statutes. This case shall proceed without the requirement of prepayment of fees and costs, subject to the provisions of section 57.081(3), Florida Statutes.

Served:

cc: Attorney General-W.P.B.
Heidi Lynn Bettendorf
Clerk Indian River

Public Defender-I.R.
David K. Brewster
Hon. Cynthia L. Cox

Public Defender-S.L.

ct

Lon Weissblum

LONN WEISSBLUM, Clerk
Fourth District Court of Appeal

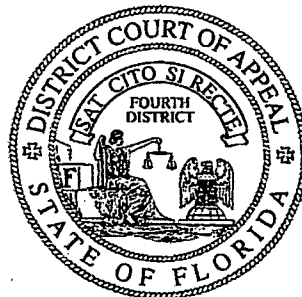










Exhibit A

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(<http://www.floridasupremecourt.org/index.html>)(<http://www.floridasupremecourt.org/justices/index.shtml>)(http://www.floridasupremecourt.org/pub_info/index.shtml)(t

Lower Tribunal Ca

Right-click to copy shortcut directly to this page. (/DocketResults/CaseByYear?CaseNumber=1161&CaseYear=2018)

Doc.	Date Docketed	Description
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_notice_84519_e81d.pdf)	07/12/2018	NOTICE-DISCRETIONARY JURIS (STAT VALID)
	07/18/2018	No Fee - Insolvent
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_letter_59371_ack01.pdf)	07/18/2018	ACKNOWLEDGMENT LETTER-NEW CASE
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_brief_129783_juris20initial20brief.pdf)	07/19/2018	JURIS INITIAL BRIEF
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_motion_117228_motion2dext20of20time2028juris20brief29.pdf)	08/13/2018	MOTION-EXT OF TIME (JURIS BRIEF)
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_motion_117229_motion2dtoll20time.pdf)	08/13/2018	MOTION-TOLL TIME
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_order_229652_o03dm.pdf)	08/14/2018	ORDER-EXT OF TIME GR (JURIS BRIEF-RESPONDENT)
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_brief_130564_juris20answer20brief.pdf)	09/12/2018	JURIS ANSWER BRIEF
 (https://efactssc-public.flcourts.org/casedocuments/2018/1161/2018-1161_disposition_144836_d20a.pdf)	12/17/2018	DISP-REV DY LACK JURIS

This site is best viewed using Chrome, Firefox, Edge, or Internet Explorer version 11.0.50 or higher.

Exhibit B

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)	\$ 1276.00	\$ N/A	\$ 1276.00	\$ 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
Total monthly income:	\$ 1276.00	\$ N/A	\$ 1276.00	\$ N/A

2. *List your 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
N/A	N/A	N/A	\$ N/A
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
N/A	N/A	N/A	\$ N/A
N/A	N/A	N/A	\$ N/A

4. *How much cash do you and your spouse have?* \$50.00

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
B B & T	checking	\$ 50.00	\$ N/A
		\$	\$
		\$	\$

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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

Home	Other real estate	Motor vehicle #1
(Value) \$ N/A	(Value) \$ N/A	(Value) \$ 2000
		Make and year: Jaguar 1994
		Model: XJS Conv
		Registration #: I-DKB

Motor vehicle #2	Other assets	Other assets
(Value) \$ N/A	(Value) \$ N/A	(Value) \$ N/A
Make: N/A		
Model: N/A		
Registration #: N/A		

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
N/A	\$ N/A	\$ N/A
N/A	\$ N/A	\$ N/A
N/A	\$ N/A	\$ N/A
N/A	\$ N/A	\$ N/A

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

Name [or, if under 18, initials only]	Relationship	Age
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, semiannually, or annually to show the monthly rate.*

	You	Your Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 500.00	\$ N/A
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)	\$ 95.00	\$ N/A
Home maintenance (repairs and upkeep)	\$ 10.00	\$ N/A
Food	\$ 150.00	\$ N/A
Clothing	\$ 20.00	\$ N/A
Laundry and dry-cleaning	\$ 10.00	\$ N/A
Medical and dental expenses	\$ 12.00	\$ N/A
Transportation (not including motor vehicle payments)	\$ 75.00	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 150.00	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	\$ 13.00	\$ N/A
Life:	\$ 0	\$ N/A
Health:	\$ 0	\$ N/A
Motor vehicle:	\$ 63.00	\$ N/A
Other:	\$ 0	\$ N/A
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$ 0	\$
Installment payments		
Motor Vehicle:	\$ 0	\$ N/A
Credit card (name):	\$ 0	\$ N/A
Department store (name):	\$ 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): Unexpected expenses	\$ 100.00	\$ N/A
Total monthly expenses:	\$ 1198.00	\$ 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 spent — or will you be spending — any money for expenses or attorney fees in connection with this lawsuit?* ☒ Yes ☐ No

If yes, how much? \$ 50.00

11. *Provide any other information that will help explain why you cannot pay the docket fees for your appeal.*

12. *State the city and state of your legal residence.*
Fort Pierce, Florida

Your daytime phone number: (772) 801-1652

Your age: 76 *Your years of schooling:* 20

Last four digits of your social-security number: 4635