

No. _____

IN THE SUPREME COURT
OF THE UNITED STATES

**QUILLIE MERLE SPRAY,
Petitioner-Appellant**

v.

**KELLY A. RYAN,
SUPERINTENDANT OF MCI-SHIRLEY,
Respondent-Appellee**

**PETITIONER'S MOTION FOR LEAVE
TO PROCEED IN FORMA PAUPERIS**

Now comes the Petitioner, Quillie Merle Spray, pursuant to S. Ct. R. 39(1), and requests leave to file the within Petition for Writ of Certiorari without prepayment of costs and to proceed in forma pauperis. As grounds therefore, the Petitioner states the following:

1. On January 21, 2003, Quillie Merle Spray was convicted of first-degree murder in Worcester Superior Court, Commonwealth of Massachusetts, and sentenced to life in prison.

2. On March 13, 2014, the Massachusetts Supreme Judicial Court affirmed the Petitioner's conviction.

3. The Petitioner, at all times throughout his legal proceedings, has been adjudicated indigent by the state courts in Massachusetts.

4. The Petitioner was previously granted leave to proceed in forma pauperis in the United States District Court, No. 1:14-cv-13877, on his petition for writ of habeas corpus, on September 17, 2017 (copy of endorsed order included herein).

5. The Petitioner is currently serving his life sentence at the Massachusetts Correctional Institution-Shirley.

6. Undersigned counsel was appointed by the Committee for Public Counsel Services in Massachusetts on May 6, 2013, to represent the Petitioner on appeal of his murder conviction and for subsequent filings in the federal courts, pursuant to Massachusetts General Law c. 211D, §2, and Massachusetts Supreme Judicial Court Rule 3:10.

7. The Petitioner's Affidavit of Indigency, dated March 11, 2019, is included herein, in which the Petitioner attests that he receives a \$50 monthly income at the prison.

WHEREFORE, the Petitioner respectfully requests that this Honorable Court allow him to proceed in forma pauperis and to waive all filing costs.

Signed under the pains and penalties of perjury on this day of April 2, 2019.

Respectfully submitted:


Kenneth Seiger Esq.
P.O. Box 470725
Brookline, MA 02447
617.277.8544
Kenneth.seiger@gmail.com

Certificate of Service

I certify that I have served a true copy of this motion upon the Respondent, by first-class mail, on this day of April 2, 2019, to: Jennifer Zalnasky, Assistant Attorney General, 1350 Main Street, Suite 1200, Springfield, MA 01103.


Kenneth Seiger

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

I, Quilla M. Spray, 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	\$ <u>0/MA</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>MA</u>	\$ <u>MA</u>
Gifts	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>MA</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>MA</u>	\$ <u>N/A</u>	\$ <u>MA</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>MA</u>	\$ <u>MA</u>
Public-assistance (such as welfare)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>Tribal Casinos</u>	\$ <u>600.00</u>	\$ <u>MA</u>	\$ <u>None</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>50.00</u>	\$ <u>N/A</u>	\$ <u>50.00</u>	\$ <u>N/A</u>

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
DOC Prison	Shirley P.O. 1218861431	2017-2018 2018-2019	\$ 50.00 \$ 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	Address	Dates of Employment	Gross monthly pay
NA	NA	NA	\$ NA \$ NA \$ NA

4. How much cash do you and your spouse have? \$ I have No cash. Prison
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
NA	\$ NA	\$ NA

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

Home
Value NA

Other real estate
Value NA

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

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

Other assets
Description _____
Value NA

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>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
\$ <u></u>	\$ <u></u>	\$ <u></u>
\$ <u></u>	\$ <u></u>	\$ <u></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
T.S. C.S.	Son Daughter	27 20

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.

I'm Divorced, But still in Contact with ex and Family this is what I guess

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>N/A</u>	\$ <u>N/A</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>N/A</u>	<i>El. \$50,00, Fuel \$50.00-?</i> \$ <u>water \$20, Ph. \$10.00-?</u>
Home maintenance (repairs and upkeep)	\$ <u>N/A</u>	\$ <u>?</u>
Food	\$ <u>200.00</u>	\$ <u>400.00</u>
Clothing	\$ <u>0</u>	\$ <u>200.00</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>?</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>?</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ <u>?</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>N/A</u>	\$ <u>?</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>N/A</u>	\$ <u>?</u>
Life	\$ <u>N/A</u>	\$ <u>?</u>
Health	\$ <u>N/A</u>	\$ <u>?</u>
Motor Vehicle	\$ <u>N/A</u>	\$ <u>?</u>
Other: <u>N/A</u>	\$ <u>N/A</u>	\$ <u>?</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>N/A</u>	\$ <u>?</u>
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>?</u>
Credit card(s)	\$ <u>N/A</u>	\$ <u>?</u>
Department store(s)	\$ <u>N/A</u>	\$ <u>?</u>
Other: _____	\$ <u>N/A</u>	\$ <u>?</u>
Alimony, maintenance, and support paid to others	\$ <u>600.</u>	\$ <u>?</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>?</u>
Other (specify): <u>?</u>	\$ <u>N/A</u>	\$ <u>?</u>
Total monthly expenses:	\$ <u>200.</u>	\$ <u>?</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? _____

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.

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

→ Executed on: 3-11-19, 20__

→ Darlene M. Spray
(Signature)

UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS

No. 1:14-cv-13877-PBS

9/30/17
Allowed Pursuant to
Quillie Spray
Petitioner

QUILLIE MERLE SPRAY,
Petitioner

v.

KELLY RYAN,
SUPERINTENDENT OF MCI-SHIRLEY
Respondent

MOTION FOR LEAVE TO APPEAL IN FORMA PAUPERIS

Now comes the Petitioner, Quillie Merle Spray, pursuant to Rule 24(a) of the Federal Rules of Appellate Procedure, and moves this Honorable Court to grant him leave to proceed in forma pauperis. As grounds therefore, Mr. Spray states:

1. On January 21, 2003, Quillie Merle Spray was convicted of first-degree murder in Worcester Superior Court and sentenced to life in prison (no. WOCR2001-00143).
2. On March 13, 2014, the Massachusetts Supreme Judicial Court affirmed Mr. Spray's conviction (No. SJC-10095).
3. Mr. Spray is currently serving his life sentence at the Massachusetts Correctional Institution-Shirley.