

18-9114

NO. _____

IN THE

SUPREME COURT OF THE UNITED STATES

TERM OF THE COURT, 2019

Supreme Court, U.S.
FILED

MAR 28 2019

OFFICE OF THE CLERK

NOLAN GEORGE

PETITIONER

VS.

NOAH NAGY, Warden

RESPONDENT(S)

On Petition for Writ of Certiorari to the United States Supreme Court

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Petitioner, Nolan George respectfully asks this Honorable Court, pursuant to Supreme Court Rule 39, for leave to proceed *in forma pauperis* so that he may file the accompanying Petition for Writ of Certiorari with this Court.

Petitioner has been found by the state trial court to be indigent for purposes of state appellate proceedings and was appointed counsel at no expense based on his indigent status. As item 12 of his affidavit indicates, Petitioner is currently incarcerated in a state prison and does not receive sufficient income to defray the costs of this petition. Six month certified copy of Prison Financial Account Statement enclosed.

Date: March 27, 2019

Nolan George

Nolan George #124226
Lakeland Correctional Facility
141 First Street
Coldwater, Michigan 49036

ORIGINAL

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

I, Nolan George 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 deductions for taxes or otherwise.

Income Source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Self-Employment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Income from Real Property (such as rental income)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Interest and Dividends	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Gifts	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Alimony	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Child Support	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Retirement (such as social sec, pensions, annuities, insurance)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Disability (such as social sec, insurance payments)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Unemployment payments	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Public Assistance (such as welfare)	\$	0.00	\$	0.00	\$	0.00	\$	0.00
Other (Specify: _____ _____	\$	0.00	\$	0.00	\$	0.00	\$	0.00
TOTAL MONTHLY INCOME	\$	0.00	\$	0.00	\$	0.00	\$	0.00

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 From To		Gross Monthly	
None				\$	0.00

3. List your spouse's employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment From To		Gross Monthly	
				\$	

4. How much money do you and your spouse have? \$ 0.00

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

Financial institution	Type of Account	Amount you have		Amount your spouse has	
None		\$	0.00	\$	0.00
		\$		\$	
		\$		\$	

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

Home value	\$	0.00	2 nd home value	\$	0.00	Other real estate value	\$	0.00	
Motor Vehicle #1 value	\$	0.00	Motor Vehicle #2 value	\$	0.00				
Other assets-Description	None					Value	\$	0.00	
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			\$ 0.00			\$ 0.00			
			\$			\$			
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.									
						Paid by you		Paid by spouse	
Rent or home mortgage payment (include lot rent for mobile home)						\$ 0.00		\$ 0.00	
Are real estate taxes included?				YES		NO			
Is property insurance included?				YES		NO			
Utilities (electricity, heating fuel, water, and telephone)						\$ 0.00		\$ 0.00	
Home maintenance (repairs)						\$ 0.00		\$ 0.00	
Food						\$ 0.00		\$ 0.00	
Laundry and dry-cleaning						\$ 0.00		\$ 0.00	
Medical and dental expenses						\$ 0.00		\$ 0.00	
Transportation (not including motor vehicle payments)						\$ 0.00		\$ 0.00	
Recreation, entertainment, newspapers, magazines, etc.						\$ 0.00		\$ 0.00	

Insurance (not deducted from wages or included in mortgage payments)										
	Homeowner's or renter's				\$	0.00	\$	0.00		
	Life				\$	0.00	\$	0.00		
	Health				\$	0.00	\$	0.00		
	Motor Vehicle				\$	0.00	\$	0.00		
	Other				\$	0.00	\$	0.00		
Taxes (not deducted from wages or included in mortgage payments). Identify each below:										
					\$	0.00	\$	0.00		
					\$	0.00	\$	0.00		
Installment payments										
	Motor Vehicle				\$	0.00	\$	0.00		
	Credit card(s)				\$	0.00	\$	0.00		
	Department store(s)				\$	0.00	\$	0.00		
	Other:				\$	0.00	\$	0.00		
Alimony, maintenance, and support paid to others					\$	0.00	\$	0.00		
Regular expenses for operation of business, profession, or farm (attach detailed statement)					\$	0.00	\$	0.00		
Other:					\$	0.00	\$	0.00		
Total monthly expenses:					\$	0.00	\$	0.00		
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	X	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 completion of this form?							YES	X	NO
	If yes, how much?				\$					
	State the attorney's name, address, and telephone number									

11.	Have you paid, or will you be paying anyone other than attorney (such as a paralegal or a typist) any money for services in connection with this case, including completion of this form?		YES	X	NO
	If yes, how much?	\$			
	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 am incarcerated in the Michigan Department of Corrections. I'm indigent. I have no income sufficient to pay the costs for this petition. Six month certified copy of Prison Financial Account Statement enclosed.				

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

Executed on: March 27, , 2019

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