

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

18-9255

IN THE  
SUPREME COURT OF THE UNITED STATES

SANTOSH RAM

(Your Name)

PETITIONER

VS.

UNITED STATES OF AMERICA

— RESPONDENT(S)

FILED

APR 22 2019

OFFICE OF THE CLERK  
SUPREME COURT, U.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*.

Please check the appropriate boxes:

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

United States District Court, Western District Of Arkansas, Fayetteville

Division, 35 E Mountain, Room 510, Fayetteville, Arkansas 72701

☐ 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.

☐ Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

☐ The appointment was made under the following provision of law: \_\_\_\_\_, or

☐ a copy of the order of appointment is appended.

Santosh Ram

(Signature)

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

I, Santosh Ram, 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	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Self-employment	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Income from real property (such as rental income)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Interest and dividends	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Gifts	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Alimony	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Child Support	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Disability (such as social security, insurance payments)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Unemployment payments	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Public-assistance (such as welfare)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Other (specify): <u>Inmate Work</u>	\$ 25.00-45.00	\$ 0.0	\$ 40.00	\$ 0.0
<b>Total monthly income:</b>	\$ 25.00-45.00	\$ 0.0	\$ 40.00	\$ 0.0

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
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
			\$
			\$

4. How much cash do you and your spouse have? \$ 33.35  
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
N/A	\$ N/A	\$ N/A
	\$	\$
	\$	\$

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

☐ 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 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
	\$	\$
	\$	\$

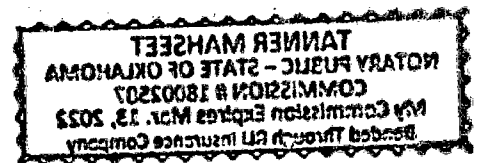
7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

Name	Relationship	Age
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.

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ N/A	\$ N/A
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)	\$ N/A	\$ N/A
Home maintenance (repairs and upkeep)	\$ N/A	\$ N/A
Food	\$ < 300	\$ N/A
Clothing	\$ N/A	\$
Laundry and dry-cleaning	\$ N/A	\$
Medical and dental expenses	\$ N/A	\$

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>N/A</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>N/A</u>	\$ <u>N/A</u>
Life	\$ <u>N/A</u>	\$ <u>N/A</u>
Health	\$ <u>N/A</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: _____	\$ <u>N/A</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: _____	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>N/A</u>	\$ <u>N/A</u>
<b>Total monthly expenses:</b>	\$ <u>&lt; 45.00</u>	\$ <u>N/A</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? N/A

If yes, state the attorney's name, address, and telephone number:

N/A

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? N/A

If yes, state the person's name, address, and telephone number:

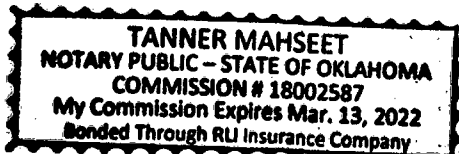
N/A

12. Provide any other information that will help explain why you cannot pay the costs of this case.

Petitioner is currently incarcerated, and only job available at the facility is inmate work. Petitioner received around \$25.00-45.00 per months for inmate work.

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

Executed on: 04/22, 2019



Sant Ram

(Signature)

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

\_\_\_\_\_

IN THE  
SUPREME COURT OF THE UNITED STATES

\_\_\_\_\_  
SANTOSH RAM — PETITIONER  
(Your Name)

vs.

\_\_\_\_\_  
UNITED STATES OF AMERICA — RESPONDENT(S)

ON PETITION FOR A WRIT OF CERTIORARI TO

\_\_\_\_\_  
UNITED STATES COURT OF APPEALS FOR THE EIGHTH CIRCUIT

\_\_\_\_\_  
(NAME OF COURT THAT LAST RULED ON MERITS OF YOUR CASE)

PETITION FOR WRIT OF CERTIORARI

\_\_\_\_\_  
Santosh Ram

\_\_\_\_\_  
(Your Name)

\_\_\_\_\_  
Great Plains Correctional Facility, P.O. Box 400

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
Hinton, Oklahoma, 73047

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
N/A

\_\_\_\_\_  
(Phone Number)

## QUESTION(S) PRESENTED

01. Whether there was violation of due process of law by the failure of the trial court to order the mental competency evaluation and/or conduct mental competency hearing with respect to Petitioner's competence to stand trial where counsel filed two unopposed motions to determine competency, and there was bonafide doubt that Petitioner was suffering from mental disease/defect?
02. Whether counsel was ineffective and guilty plea involuntary, unknowing, uninformed, unintelligent, and without understanding where guilty plea was induced by promise, lie, threat, misrepresentation, and under duress while Petitioner was incompetent and suffering from mental disease/defect, and counsel failed to provide adequate legal advice, failed to put any meaningful adversarial process, failed to advise on the applicable laws in relation to facts, failed to advise on true nature of the plea agreement and applicability of the United States Sentencing Guidelines?
03. Whether probable cause existed to search the Petitioner's new apartment for child pornography and/or any other evidence where only information available to agents was sexual explicit chat texts which were stale and almost two-years old, no new information was discovered to link Petitioner's new apartment to any unlawful activity, Petitioner had moved to new apartment at another location, IP (Internet Protocol) address change automatically and can be easily spoofed, Facebook chat texts do not get saved on local computer, and agents already had all chat texts?
04. Whether government breached the plea agreement by demanding a sentence beyond parties' intent (guidelines sentence) where government did not stipulate to any applicable guidelines, base offense level, any enhancements, guidelines range, and calculated guidelines range was  $4\frac{1}{2}$  times (135-168 months) longer than the actual applicable guidelines range (30-37 months), and whether this ambiguity should have been resolved against the government?