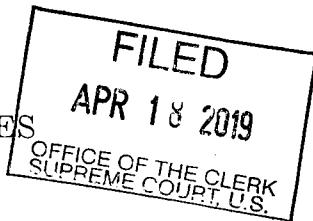


No. 18-9428 ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES



ROBERT L. JENKINS — PETITIONER, PRO SE
(Your Name)

PELICIA HALL, COMMISSIONER, MISSISSIPPI DEPARTMENT OF CORRECTIONS;
RON KING, SUPERINTENDENT, CENTRAL MISS. CORRECTIONAL FACILITY,
VS. 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*.

Please check the appropriate boxes:

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

MISSISSIPPI'S APPELLATE COURTS PURSUANT TO MISS. RULE OF APPELLATE PROCEDURE 6(A)(2). AN ORDER PERMITTING PETITIONER TO PROCEED IN FORMA PAUPERIS IS ATTACHED.

Petitioner has not previously been granted leave to proceed *in forma pauperis* in any other court.

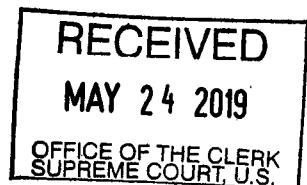
Petitioner's affidavit or declaration in support of this motion is attached hereto.

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: 28 U.S.C. 1746, RULE 29 OF THE SUPREME COURT OF THE UNITED STATES or

a copy of the order of appointment is appended.

Robert Jenkins
(Signature)



IN THE CIRCUIT COURT OF HARRISON COUNTY MISSISSIPPI

SECOND JUDICIAL DISTRICT

2010-TS-203

STATE OF MISSISSIPPI

VERSUS

ROBERT LEE JENKINS

FILED

MAR 29 2010

OFFICE OF THE CLERK
SUPREME COURT
COURT OF APPEALS

Cause No: B2402 08-018

DEFENDANT

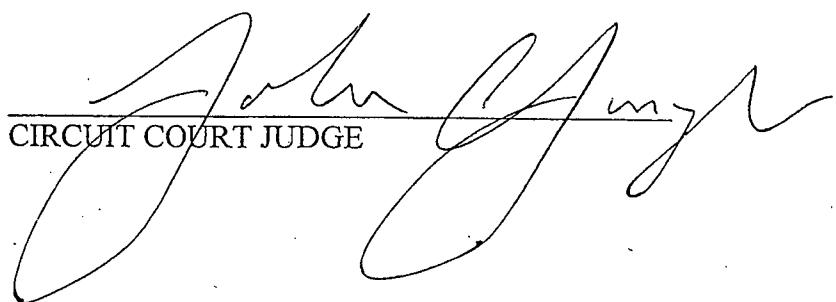
ORDER

THIS Cause came on a Motion by the Defendant joined by his previous Attorney, Dana R. Christensen, that the Defendant, Robert Lee Jenkins, be allowed to appeal to the State Supreme Court in forma pauperis and that Dana R. Christensen be allowed to be appointed as the Defendant's counsel, and the Court feeling the Motion is well-taken, sustains same. It is therefore,

ORDERED that the Defendant herein, Robert Lee Jenkins, is an indigent and should be allowed to proceed with his appeal to the State Supreme Court in compliance with Rule 6 of the Rules of the Supreme Court in forma pauperis. Defendant is an indigent and cannot afford to pay any fees, costs or Attorney's Fees in connection with this appeal. It is further,

ORDERED that Dana R. Christensen shall be allowed to be appointed as the Defendant's counsel and represent the Defendant in this appeal.

SO ORDERED AND ADJUDGED this 26 day of March, 2010.


CIRCUIT COURT JUDGE

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

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

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
<u>N/A</u>		<u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>		<u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>		<u>N/A</u>	\$ <u>N/A</u>

4. How much cash do you and your spouse have? \$ NONE
 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
<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

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

Home Value ∅

Other real estate Value ∅

Motor Vehicle #1
 Year, make & model ∅
 Value ∅

Motor Vehicle #2
 Year, make & model ∅
 Value ∅

Other assets
 Description NONE
 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
<u>N/A</u>	\$ <u>Ø</u>	\$ <u>Ø</u>
<u>N/A</u>	\$ <u>Ø</u>	\$ <u>Ø</u>
<u>N/A</u>	\$ <u>Ø</u>	\$ <u>Ø</u>

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

Name	Relationship	Age
<u>NONE</u>		
<u>NONE</u>		
<u>NONE</u>		

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)	\$ <u>Ø</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>Ø</u>	\$ <u>N/A</u>
Home maintenance (repairs and upkeep)	\$ <u>Ø</u>	\$ <u>N/A</u>
Food	\$ <u>Ø</u>	\$ <u>N/A</u>
Clothing	\$ <u>Ø</u>	\$ <u>N/A</u>
Laundry and dry-cleaning	\$ <u>Ø</u>	\$ <u>N/A</u>
Medical and dental expenses	\$ <u>Ø</u>	\$ <u>N/A</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>N/A</u>
Life	\$ <u>0</u>	\$ <u>N/A</u>
Health	\$ <u>0</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Other: <u>NONE</u>	\$ <u>0</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>NONE</u>	\$ <u>0</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>0</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>0</u>	\$ <u>N/A</u>
Other: <u>NONE</u>	\$ <u>0</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>N/A</u>
Other (specify): <u>NONE</u>	\$ <u>0</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>0</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? _____

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.

BEEN INCARCERATED FOR 11 YEARS, AND SEPARATED FROM SPOUSE, PARENTS DECEASED. ANY OTHER FINANCIALS WOULD BE A SPONTANEOUS SURPRISE FROM ANY OTHER LIVING RELATIVE.

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

Executed on: April 18, 2019

Robert Jenkins
(Signature)