

No. 18-9586

IN THE  
SUPREME COURT OF THE UNITED STATES

ORIGINAL

Supreme Court, U.S.  
FILED

MAY 28 2019

OFFICE OF THE CLERK

Jovan Watkins — PETITIONER  
(Your Name)

MARYLAND DEPARTMENT OF PUBLIC SAFETY  
AND CORRECTION SERVICE ET AL 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):

U.S. DISTRICT COURT DISTRICT OF MARYLAND (Baltimore)

U.S. COURT OF APPEALS FOR THE FOURTH CIRCUIT

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.

Jovan Watkins  
(Signature) RECEIVED  
JUN -4 2019

OFFICE OF THE CLERK

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

I, Jovan Watkins, 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.

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
Employment	\$ <u>0</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>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</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>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>NA</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<b>Total monthly income:</b>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</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
NA	NA	NA	\$ NA

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

4. How much cash do you and your spouse have? \$ NA  
 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	\$ 0	\$ 0

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 0

Motor Vehicle #1  
 Year, make & model NA  
 Value 0

Motor Vehicle #2  
 Year, make & model NA  
 Value 0

Other assets  
 Description NA  
 Value 0

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

**Person owing you or your spouse money**

NA

**Amount owed to you**

\$ 8  
\$ 0  
\$ 0

**Amount owed to your spouse**

\$ 0  
\$ 0  
\$ 0

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").

NA

0  
0  
0

0  
0  
0

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)

\$ 0 \$ 6

Are real estate taxes included?  Yes  No  
Is property insurance included?  Yes  No

Utilities (electricity, heating fuel,  
water, sewer, and telephone)

\$ 0 \$ 0

Home maintenance (repairs and upkeep)

\$ 0 \$ 0

Food

\$ 0 \$ 0

Clothing

\$ 0 \$ 0

Laundry and dry-cleaning

\$ 0 \$ 0

Medical and dental expenses

\$ 0 \$ 0

(24)

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

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.

N A

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:

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? 30%

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

I AM IN A INPATIENT TREATMENT Facility  
And HAVE NO MEANS OF INCOME. It is court  
ORDER by Judge Kenda V. Ausby

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: May 25, 2019

Jordan Watkins  
(Signature)

(6)

\* ATTORNEY I APPLIED FOR WHILE AT ECT-ANNECY

OFFICE OF THE FEDERAL PUBLIC DEFENDER

DISTRICT OF MARYLAND

NORTHERN DIVISION  
TOWER II, NINTH FLOOR  
100 SOUTH CHARLES STREET  
BALTIMORE, MARYLAND 21201-2705  
TEL: (410) 962-3962  
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TOLL FREE (855) 213-8450

JAMES WYDA  
FEDERAL PUBLIC DEFENDER

January 17, 2019

**ATTORNEY-CLIENT PRIVILEGED  
CONFIDENTIAL COMMUNICATION**

Mr. Jovan Watkins  
No. 438146  
ECI Annex  
30420 Revells Neck Road  
Westover, Maryland 21890

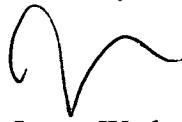
*The court denied motion to  
Appoint Counsel*

Dear Mr. Watkins:

This will acknowledge receipt of your letter requesting assistance. I must inform you that this Office is unable to legally represent persons unless we are appointed to do so by the United States District Court for the District of Maryland.

If you are looking for representation in the Fourth Circuit, you should write a letter to the United States Court of Appeals for the Fourth Circuit, 1100 East Main Street, Fifth Floor, Richmond, Virginia 23219. In your letter, explain your circumstances and ask that counsel be appointed to address your issues. Be specific as possible as to your need for appointed counsel. If the judge determines that counsel should be appointed for you, the Court will appoint counsel on your behalf.

Sincerely,



James Wyda  
Federal Public Defender

JW:sdf

