

No. 18-9646

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S.
FILED

APR 17 2019

OFFICE OF THE CLERK

MAX WEBB Pro Se PETITIONER
(Your Name)

VS.

5th Cir — 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):

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.

MAX WEBB
(Signature)

RECEIVED
JUN 11 2019
OFFICE OF THE CLERK SUPREME COURT, U.S.

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

I, MAX WEBB, 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> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Self-employment	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Income from real property (such as rental income)	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Interest and dividends	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Gifts	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Alimony	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Child Support	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Disability (such as social security, insurance payments)	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Unemployment payments	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Public-assistance (such as welfare)	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Other (specify): <u>Gifts</u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>
Total monthly income:	\$ <u> </u>	\$ <u> </u>	\$ <u> </u>	\$ <u> </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
<i>N/A</i>	_____	_____	\$ <i>600</i>
	_____	_____	\$ <i>600</i>
	_____	_____	\$ <i>600</i>

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
<i>N/A</i>	_____	_____	\$ <i>600</i>
	_____	_____	\$ <i>600</i>
	_____	_____	\$ <i>600</i>

4. How much cash do you and your spouse have? \$ *0*
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
<i>N/A</i>	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

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 _____

Motor Vehicle #1
Year, make & model *N/A*
Value _____

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

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

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

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

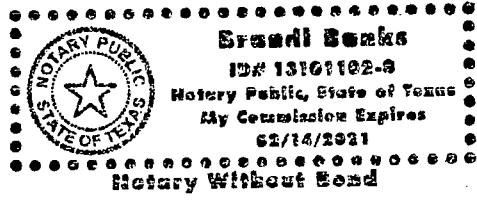
Executed on: April, 20 19

Marshall
Max Wels
(Signature)

CSINIB02/CINIB02 TEXAS DEPARTMENT OF CRIMINAL JUSTICE 03/12/19
 1E51/ST00112 IN-FORMA-PAUPERIS DATA 08:00:35
 TDCJ#: 01924604 SID#: 05783080 LOCATION: MAC STRINGFEL INDIGENT DTE:
 NAME: WEBB, MAX EDWARD BEGINNING PERIOD: 09/01/18
 PREVIOUS TDCJ NUMBERS: 00860767 01470613

CURRENT BAL:	331.48	TOT HOLD AMT:	0.00	3MTH TOT DEP:	350.00
6MTH DEP:	650.00	6MTH AVG BAL:	229.42	6MTH AVG DEP:	108.33
MONTH HIGHEST BALANCE	TOTAL DEPOSITS	MONTH HIGHEST BALANCE	TOTAL DEPOSITS		
02/19 408.83	0.00	11/18 306.93	300.00		
01/19 488.43	350.00	10/18 104.58	0.00		
12/18 252.73	0.00	09/18 205.78	0.00		

PROCESS DATE HOLD AMOUNT HOLD DESCRIPTION



STATE OF TEXAS COUNTY OF Brazoria
 ON THIS THE 12th DAY OF March, 19, I CERTIFY THAT THIS DOCUMENT IS A TRUE,
 COMPLETE, AND UNALTERED COPY MADE BY ME OF INFORMATION CONTAINED IN THE
 COMPUTER DATABASE REGARDING THE OFFENDER'S ACCOUNT. NP SIG: Brandi Banks
 PF1-HELP PF3-END ENTER NEXT TDCJ NUMBER: _____ OR SID NUMBER: _____