No.		

## In the Supreme Court of the United States

DAWUD SPAULDING,

Petitioner,

v.

STATE OF OHIO, Respondent.

\_\_\_\_

On Petition for Writ of Certiorari to the Supreme Court of Ohio

\_\_\_\_

#### APPLICATION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Petitioner Dawud Spaulding respectfully requests leave to file the attached petition for writ of certiorari without payment of costs and to proceed *in forma pauperis*.

Petitioner, with respect to the basis of the attached petition, was granted leave to proceed *in forma pauperis* in the following instances: the Summit County Common Pleas Court found Petitioner Spaulding indigent and appointed counsel for his capital proceedings, *State v. Spaulding*, Case No. 14-CR-0541, and for his direct appeal before the Ohio Supreme Court, *State v. Spaulding*, 2013-Ohio-0536. Petitioner has filed Affidavits attesting to his indigency in every court since Petitioner was sentenced to death in 2013.

Petitioner Spaulding declaration in support of this motion is attached hereto.

# Respectfully submitted, OFFICE OF THE OHIO PUBLIC DEFENDER

#### /s/ Erika LaHote

Erika LaHote [0092256] Assistant State Public Defender Counsel of Record

### /s/ Rachel Troutman

Rachel Troutman [0076741] Assistant State Public Defender Supervising Attorney

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Counsel for Petitioner Spaulding

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

I, DAWOD EL SPANDING, 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.

	verage monthly amone past 12 months	ount during	Amount expe	ected
	You	Spouse	You	Spouse
Employment	\$ 0	\$	\$ 9	\$
Self-employment	\$	\$	\$	\$
Income from real propert (such as rental income)	sy \$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child Support	\$ 4.00	\$	\$ 4.00	\$
Retirement (such as soci security, pensions, annuities, insurance)	ial \$	\$	\$	\$
Disability (such as social security, insurance payr		\$	\$	\$
Unemployment payments	\$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	\$	\$	\$	\$
Total monthly inc	ome: \$_/2 °°	\$	\$_12 °	\$

Employer	Address	Dates of Employment	Gross monthly pay
		_	\$ 12 22 \$ \$
			\$
	use's employment histor y pay is before taxes or		, most recent employer fi
Employer	Address	Dates of Employment	Gross monthly pay
//		_	\$ \$ \$
	_/ _//		\$
institution. Financial institu		t Amount you have	Amount vour spouse ha
		Amount you have	Amount your spouse ha
Financial institu  5. List the assets		\$ 1	Amount your spouse has \$ \$ \$
Financial institu  5. List the assets	s, and their values, which	\$ 1	Amount your spouse has \$\$ \$\$ \$se owns. Do not list cloth
Financial institu  5. List the assets and ordinary h	s, and their values, which	ch you own or your spous	Amount your spouse has \$\$ \$\$ se owns. Do not list cloth
5. List the assets and ordinary halue/	s, and their values, which household furnishings.	ch you own or your spous  Other real esta  Value//	Amount your spouse has \$\$ \$\$ se owns. Do not list clothed the details and the details are selected.
5. List the assets and ordinary halue/	s, and their values, which household furnishings.  #1 model \( \mu / A \)	ch you own or your spous  Other real esta  Value//	te owns. Do not list cloth
5. List the asset and ordinary halue	s, and their values, which household furnishings.  #1 model \( \mu / A \)	Ch you own or your spous  Other real esta  Value//	Amount your spouse has \$\$ \$\$ se owns. Do not list clothed the description of the
5. List the assets and ordinary halue/	s, and their values, which household furnishings.  #1 model \( \beta / A \)	Ch you own or your spous  Other real esta  Value//	Amount your spouse has \$\$ \$s se owns. Do not list cloth ate #2 model#2

Person owing you or your spouse money	Amount owed to you	Amount owed to your s
N/A.	\$ \$ N/A \$	\$ //// \$
7. State the persons who r	ely on you or your spouse for su Relationship	apport. <b>Age</b>
DEEVANN MANSEL	SON	/7
8. Estimate the average me paid by your spouse. annually to show the me	onthly expenses of you and your Adjust any payments that are onthly rate.	family. Show separately the armade weekly, biweekly, quarte

	. • •	. our opouco
Rent or home-mortgage payment (include lot rented for mobile home)  Are real estate taxes included?   Is property insurance included?   Yes   No	\$	s
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$	\$
Home maintenance (repairs and upkeep)	\$	\$
Food	\$	\$
Clothing	\$	s
Laundry and dry-cleaning	\$	\$
Medical and dental expenses	\$	\$

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0	\$
Recreation, entertainment, newspapers, magazines, etc.	s	\$
Insurance (not deducted from wages or included in mort	gage payments)	
Homeowner's or renter's	\$	s
Life	\$	- \$
Health	\$	ss
Motor Vehicle	\$	_ \$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage	e payments)	
(specify):	\$	\$
Installment payments		
Motor Vehicle	\$	_ \$
Credit card(s)	\$	\$
Department store(s)	\$	s
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$ 4.00	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses:	\$ 4.00	

\*

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 declare under penalty of perjury that the foregoing is true and correct.
Executed on: 4-12-19 , 2013

Downd El Spaulding
(Signature)