

**19-6096**

IN THE  
SUPREME COURT OF THE UNITED STATES

JERRY SIMMONS

VS.

DARREL VANNOY

Respondent

Petitioner  
**ORIGINAL**

**MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

FILED  
SEP 11 2019  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

The petitioner asks leave to file the attached petition for writ of certiorari without prepayment of cost and to proceed *in forma pauperis*.

[X] Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):  
United States Court Of Appeals For The Fifth Circuit Court Of Appeals, No. 18-30711

United States District Court, Eastern District Court, No. 2:17-CV-12120

[ ] 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

RECEIVED  
SEP 30 2019  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

  
Signature

RECEIVED  
SEP 16 2019  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, Jerry Simmons, 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 cost of this case or give security therefore; 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>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>N/A</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 payments
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>0</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>0</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>0</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 payments
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>0</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>0</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>0</u>

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

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>0</u>	\$ <u>0</u>
<u>N/A</u>	<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	<u>N/A</u>	\$ <u>0</u>	\$ <u>0</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 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 N/A  
Description N/A  
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
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

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

Name	Relationship	Age
<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>

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 payments (include lot rented for mobile home)	\$ <u>0</u>	\$ <u>0</u>
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)	\$ <u>0</u>	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>0</u>
Food	\$ <u>0</u>	\$ <u>0</u>
Clothing	\$ <u>0</u>	\$ <u>0</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>0</u>
Medical dental expenses	\$ <u>0</u>	\$ <u>0</u>

	You	Your Spouse
Transportation (not including motor vehicle payment	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>0</u>

**Insurance (not deducted from wages or included in mortgage payments)**

Homeowner's or renter's	\$ <u>0</u>	\$ <u>0</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Other: <u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

**Taxes (not deducted from wages or included in mortgage payments)**

(specify): <u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
-----------------------	-------------	-------------

**Installment payments**

Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit card(s)	\$ <u>0</u>	\$ <u>0</u>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: <u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
--	-------------	-------------

Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>0</u>
--	-------------	-------------

Other (specify):	\$ <u>0</u>	\$ <u>0</u>
------------------	-------------	-------------

<b>Total monthly expenses:</b>	\$ <u>0</u>	\$ <u>0</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 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 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

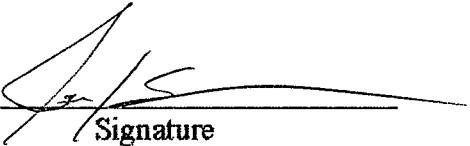
If yes, state the person's name, address, and telephone number: N/A

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

N/A

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

Executed on: Sept. 10, 2019.

  
Signature

**STATEMENT OF ACCOUNT**  
(Certified Institutional Equivalent)

I hereby certify that Jerry Simmons, inmate number # 593386,  
the plaintiff herein has the following sums of money on account to his credit at \_\_\_\_\_  
Louisiana State Penitentiary, the institution where he is confined:

Prison Drawing Account: \$ -0-

Prison Savings Account: \$ -0-

A. Cash \_\_\_\_\_

B. Bonds \_\_\_\_\_

I further certify that the average monthly deposits for the preceding six months is  
\$ -0-.

*( The average monthly deposits are to be determined by adding the deposits made during a given month and dividing that total by the number of deposits made during that month. This is repeated for each of the six months. The average from each of the six months are to be added together and the total is to be divided by six.)*

I further certify that the average monthly balance for the preceding six months is  
\$ .12.

*( The average monthly balance is to be determined by adding the deposits made during a given month and dividing that total by the number of deposits made during that month. This is repeated for each of the six months. The balance from each of the six months are to be added together and the total is to be divided by six.)*

\_\_\_\_\_  
Date Certified

Sandra Rosso  
Signature of Authorized Officer of Institution

DATE

AUG 21 2019

CERTIFIED