

IN THE  
**Supreme Court of the United States**

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**HAFIZ MUHAMMAD SHER ALI KHAN**  
*Petitioner*

v.

**UNITED STATES OF AMERICA,**  
*Respondent.*

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**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*.

Petitioner Hafiz Muhammad Sher Ali Khan was granted leave to proceed *in forma pauperis* in the Eleventh Circuit Court of Appeals, as well as the District Court for the Southern District of Florida, based on his affidavit of indigency. Mr. Khan has remained incarcerated since, and his financial circumstances have not changed. This affidavit is attached here, pursuant to Rule 39.1. Counsel is not appointed, but represents Mr. Khan through the non-profit Constitutional Law Center for Muslims in America, at no charge to Petitioner. Petitioner respectfully requests the Court grant his motion for leave to proceed *in forma pauperis*.



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Signature of Counsel for Petitioner

**UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF FLORIDA  
MIAMI DIVISION  
Case No.: 1:16-cv-24483-RNS  
(Criminal Case No. 1:11-cr-20331-RNS-1)  
MAGISTRATE JUDGE P.A. WHITE**

Hafiz Khan,

*Petitioner,*

**AFFIDAVIT ACCOMPANYING MOTION  
FOR PERMISSION TO APPEAL  
IN FORMA PAUPERIS**

v.

United States of America,

*Respondent.*

**Affidavit in Support of Motion**

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Signed: 

**Instructions**

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: 7-6-18

**My issue on appeal of the Magistrate Judge's Report and Recommendations regarding my §2255 appeal, and the only issue for which I was granted a Certificate of Appealability by United States District Judge, Robert N. Scola, Jr., is my claim that my trial counsel was ineffective for failing to present certain Pakistani witnesses in the manner prescribed by this Court during my District Court trial in this matter.**

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	\$0	\$0	\$0	\$0
Self-employment	\$0	\$0	\$0	\$0
Income from real property (such as rental income)	\$0	\$0	\$0	\$0
Interest and dividends	\$0	\$0	\$0	\$0
Gifts	\$0	\$0	\$0	\$0
Alimony	\$0	\$0	\$0	\$0
Child support	\$0	\$0	\$0	\$0
Retirement (such as social security, pensions, annuities, insurance)	\$0	\$0	\$0	\$0
Disability (such as social security, insurance payments)	\$0	\$0	\$0	\$0
Unemployment payments	\$0	\$0	\$0	\$0
Public-assistance (such as welfare)	\$0	\$9,000	\$0	\$750
Other (specify):	\$0	\$0	\$0	\$0
<b>Total monthly income:</b>	<b>\$0</b>	<b>\$750</b>	<b>\$0</b>	<b>\$750</b>

2. *List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.) N/A*

Employer	Address	Dates of employment	Gross monthly pay
			\$

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.) N/A*

Employer	Address	Dates of employment	Gross monthly pay
			\$0

4. *How much cash do you and your spouse have? \$0.00*

*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
		\$0	\$0

*If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.*

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

Home	Other real estate	Motor vehicle #1
(Value) \$0	(Value) \$0	(Value) \$0
		Make and year:
		Model:
		Registration #:

Motor vehicle #2	Other assets	Other assets
(Value) \$0	(Value) \$0	(Value) \$0
Make and year:		
Model:		
Registration #:		

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



Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
N/A	\$0	\$0

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

Name [or, if under 18, initials only]	Relationship	Age

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, semiannually, or annually to show the monthly rate.

	You	Your Spouse
Rent or home-mortgage payment (include lot rented for mobile home) Are real estate taxes included? [X] Yes [ ] No Is property insurance included? [X] Yes [ ] No	\$0	\$750
Utilities (electricity, heating fuel, water, sewer, and telephone) (Included in the rent paid for spouse)	\$0	\$0
Home maintenance (repairs and upkeep)	\$0	\$0
Food (food stamps for spouse)	\$0	\$0
Clothing	\$0	\$0
Laundry and dry-cleaning	\$0	\$0
Medical and dental expenses (Medicaid/Medicare for spouse)	\$0	\$0
Transportation (not including motor vehicle payments)	\$0	\$0
Recreation, entertainment, newspapers, magazines, etc.	\$0	\$0
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	\$0	\$0
Life:	\$0	\$0
Health:	\$0	\$0
Motor vehicle:	\$0	\$

Taxes (not deducted from wages or included in mortgage payments) (specify):	\$0	\$0
Installment payments		
Motor Vehicle:	\$0	\$0
Credit card (name):	\$0	\$0
Department store (name):	\$0	\$0
Other:	\$0	\$0
Alimony, maintenance, and support paid to others	\$0	\$0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$0	\$
Other (specify):	\$0	\$0
<b>Total monthly expenses:</b>	<b>\$0</b>	<b>\$750</b>

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 spent — or will you be spending — any money for expenses or attorney fees in connection with this lawsuit?* ☐ Yes ☒ No

*If yes, how much?* \$ \_\_\_\_\_

11. *Provide any other information that will help explain why you cannot pay the docket fees for your appeal.*

I am presently incarcerated at Butner FMC, Butner, NC. I am 83 years of age. I do not speak English. I have a release date of 2/21/2033. I was permitted to proceed *in forma pauperis* in the district-court action, and had a pro bono attorney in the filing of my Habeas/§2255 petition.

12. *State the city and state of your legal residence.* **Legal resident of Florida, but incarcerated in Butner, NC**

*Your daytime phone number:* N/A

*Your age:* 83 *Your years of schooling:* **Did not attend school (Attended Qur'an or religious school only.)**

*Last four digits of your social-security number:* 6387