

19-6248

United States Supreme Court
United States of America

ORIGINAL

WARREN PARKS,)
Appellant,) United States Court of Appeals
Warren Parks/Agent) for the Seventh
Circuit)
)
-v-) Appeal No. _____
)
UNITED STATES DISTRICT COURT,)
Respondent.)

MOTION FOR LEAVE TO FILE AND PROCEED ON APPEAL *MANDAMUS*

IN FORMA PAUPERIS

The Agent, for, Appellant (WARREN PARKS), herein, do hereby move his Honorable Court for Leave to file the above-entitled cause of action in forma pauperis. In support of said motion, Appellant has attached an affidavit of financial status and incorporates the same herein.

Warren Parks
Appellant
AGENT
All Right Reserve
U.C.C. 1-308

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

**United States Court of Appeals
for the Seventh Circuit**

Warren Parks
Warren Parks Agent

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:

Appeal from the United States District Court for the
Southern District of INDIANA
District Court No. 17-2342
District Court Judge WILLIAM J. BAUER

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 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.

question number: Date: 7/30/19

My issues on appeal are:

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

- Employment
- Self-employment
- Income from real property
(such as rental income)
- Interest and dividends
- Gifts
- Alimony
- Child support
- Retirement (such as social security, pensions, annuities, insurance)
- Disability (such as social security, insurance payments)
- Unemployment payments
- Public-assistance (such as welfare)
- Other (specify):

2. List your employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay

3. List your spouse's employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay

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

Financial Institution	Type of Account	Amount you have	Amount your spouse has

If you are a prisoner, 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.

Home (Value)	Other real estate (Value)	Motor Vehicle #1 (Value)

Motor Vehicle #2 (Value)	Other assets (Value)	Other assets (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

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

Name	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 (including lot rented for mobile home)	\$ _____	\$ _____
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	\$ _____	\$ _____
Transportation (not including motor vehicle expenses)	\$ _____	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ _____	\$ _____
Insurance (not deducted from wages or included in mortgage payments)	\$ _____	\$ _____
Homeowner's or renter's		

Life

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____

Health

Motor Vehicle

Other: _____

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

Installment payments

\$ _____ \$ _____

Motor Vehicle \$ _____ \$ _____
Credit card (name): \$ _____ \$ _____
Department store (name): \$ _____ \$ _____
Other: _____ \$ _____ \$ _____

Alimony, maintenance, and support paid to others \$ _____ \$ _____

Regular expenses for operation of business, profession, or farm (attach
detail) \$ _____ \$ _____

Other (specify): \$ _____ \$ _____

Total monthly expenses: \$ _____ \$ _____

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 connections 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 docket fees for your appeal.

*BECAUSE OF THIS ILLEGAL IMPRISONMENT, I AM UNABLE
TO PAY FOR THESE*

13. State the address of your legal residence.

*I HAVE NONE I SOJOURN AT
1946 W. US. HWY 40
GREENCASTLE INDIANA
46135*