

No. 19-6841

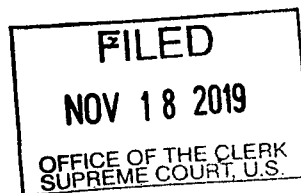
IN THE SUPREME COURT OF THE UNITED STATES

ADAM SCOTT IV,
petitioner

v

UNITED STATES OF AMERICA,
respondent

ORIGINAL



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 cost and to proceed in the following In Forma Pauperis.

The petitioner has been granted leave to proceed as a pauper in the following cases:

Third Circuit Court of Appeals no. 17-3296

District Court for Eastern District of Pennsylvania civ 19-2263

The sworn financial affidavit is attached.

Respectfully Submitted


Adam Scott IV

11/19
A.S.

AFFIDAVIT IN FORMA PAUPERIS

~~CONFIDENTIAL~~ IN THE SUPREME ~~COURT~~

ADAM SCOTT IV

petitioner

v.

Case No.

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.)

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.

Signed

Date:

11	11	19
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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
expecte
d next
month

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Employment

\$0 \$N/A \$0 \$N/A

Self-employment

\$0 \$N/A \$0 \$N/A

Income from real property
(such as rental income)

\$0 \$N/A \$0 \$N/A

Interest and dividends

\$0 \$N/A \$0 \$N/A

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Income source

Average
monthly
amount
during
the
past 12
months

Amount
expecte
d next
month

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Gifts

\$300 \$N/A \$50 \$N/A

Alimony

\$0 \$N/A \$0 \$N/A

Child support

\$0 \$N/A \$0 \$N/A

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Income source

Average
monthly
amount
during
the
past 12
months

Amount
expecte
d next
month

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Retirement (such as social
security, pensions,
annuities, insurance)

\$0 \$N/A \$0 \$N/A

Disability (such as social
security, insurance
payments)

\$0 \$N/A \$0 \$N/A

Unemployment payments

\$0 \$N/A \$0 \$N/A

Income source

Average
monthly
amount
during
the
past 12
months

Amount
expecte
d next
month

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Public-assistance (such as
welfare)

\$0 \$N/A \$0 \$N/A

Other (specify):

N/A

\$0 \$N/A \$0 \$N/A

Total monthly income:

\$300 \$N/A \$300 \$N/A

2. List your employment history for the past two years, most recent employer first. (Gross

monthly pay is before taxes or other deductions.)

Employer	Address	Date of employment	Gross monthly pay
NONE	N/A	N/A	N/A
NONE	N/A	N/A	N/A
NONE	N/A	N/A	N/A

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	Date of employment	Gross monthly pay
NONE	N/A	N/A	N/A
NONE	N/A	N/A	N/A
NONE	N/A	N/A	N/A

4. How much cash do you and your spouse have? \$ NONE

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
NONE	N/A	\$ N/A	\$ N/A
NONE	N/A	\$ N/A	\$ N/A
NONE	N/A	\$ N/A	\$ N/A

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.

Home (Value)	Other real estate (Value)	Motor vehicle #1 (Value)
NONE	NONE	Make & year: NONE
		Model: N/A
		Registration #: N/A

Motor vehicle #2	Other assets	Other assets
NONE	NONE	
(Value)	(Value)	(Value)
Make & Year:		
N/A		
Model:		
N/A		
Registration #:		
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
NONE	NONE	N/A

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

Name [or, if under 18, initials only]	Relationship	Age
NONE	N/A	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)	\$ 0	\$ N/A
Are real estate taxes included? Yes No		
Is property insurance included? Yes No		
Utilities (electricity, heating, fuel, water, sewer, and telephone)	\$ 0	\$ N/A
Home maintenance (repairs and upkeep)	\$ 0	\$ N/A
Food	\$ 40	\$ N/A
Clothing	\$ 10	\$ N/A
Laundry and dry-cleaning	\$ 0	\$ N/A
Medical and dental expenses	\$ 0	\$ N/A
Transportation (not including motor vehicle payments)	\$ 0	\$ N/A

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	You	Your spouse
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)	\$ 0	\$ N/A
Homeowner's or renter's	\$ 0	\$ N/A
Life	\$ 0	\$ N/A
Health	\$ 0	\$ N/A
Motor Vehicle	\$ 0	\$ N/A
Other: <u>N/A</u>	\$ N/A	\$ N/A
Taxes (not deducted from wages or included in mortgage payments) (specify): <u>N/A</u>	\$ 0	\$ N/A
Installment payments	\$ 0	\$ N/A
Motor Vehicle	\$ 0	\$ N/A
Credit card (name): <u>N/A</u>	\$ N/A	\$ N/A

	You	Your spouse
Department store (name): _____	\$ 0	\$ N/A
Other: <u>N/A</u>	\$ 0	\$ N/A
Alimony, maintenance, and support paid to others	\$ 0	\$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ N/A
Other (specify): <u>N/A</u>	\$ 0	\$ N/A
Total monthly expenses:	\$ 50	\$ N/A

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. N/A

12. State the city and state of your legal residence.

FEDERAL BUREAU OF PRISONS
PHILADELPHIA, PA

Your daytime phone number: (____) _____

Your age: 36 Your years of schooling: 12

UNITED STATES COURT OF APPEALS FOR THE THIRD CIRCUIT

No. 17-3296

United States v. Scott
(E.D. 2-10-cr-00677-001)

To: Clerk

- 1) Motion by Appellant for Leave to Proceed In Forma Pauperis
- 2) Motion by Appellant for Appointment of Counsel

No action will be taken on the motion as it is unnecessary because the fee has been waived in this appeal based on Appellant's prior indigent status. Appellant's motion for appointment of counsel is referred to a motions panel.

For the Court,

s/ Marcia M. Waldron
Clerk

Dated: December 18 2017

CJG/cc: Maria M. Carrillo, Esq.
Adam Scott