

19-7176 No.:

IN THE SUPREME COURT OF THE UNITED STATES

DAVID P. MORAN - Petitioner

v.

STATE OF FLORIDA - Respondent

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

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

Petitioner has not previously been granted leave to proceed in forma pauperis in any other court. Petitioners declaration in support of this motion is attached hereto.

D. Moran
David Moran #X97428
Pro Se Litigant

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

I, David P. Moran, 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 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.

| | 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 property | \$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 | \$0 | \$0 | \$0 | \$0 |
| Disability | \$0 | \$0 | \$0 | \$0 |
| Unemployment payments | \$0 | \$0 | \$0 | \$0 |
| Public assistance | \$0 | \$0 | \$0 | \$0 |
| Total monthly income | \$0 | \$0 | \$0 | \$0 |

2. List your employment history for the past two years.

Employer Address. Dates of Employment Gross Monthly Pay

N/A.

N/A.

\$0

3. List your spouse's employment history for the past two years.

| Employer Address. | Dates of Employment | Gross monthly pay |
|-------------------|---------------------|-------------------|
| N/A. | N/A. | \$0 |

4. How much cash do you and your spouse have? \$0

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account Amount you have Amount your spouse has

| | | |
|------|------|-----|
| N/A. | \$0. | \$0 |
|------|------|-----|

5. List the assets, and their values, which you own or your spouse owns.

| | |
|-----------|-------------------|
| Home | Other real estate |
| Value N/A | Value N/A |

| | |
|-----------------------|-----------------------|
| Motor vehicle #1 | Motor vehicle #2 |
| Year, make, model N/A | Year, make, model N/A |
| Value N/A | Value N/A |

6. State every person, business, or organization owing you or your spouse money, and amount owed.

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

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

| Name. | Relationship | Age |
|-------|--------------|-----|
| N/A | N/A | N/A |

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 | \$0 | \$0 |
| Utilities | \$0 | \$0 |
| Home maintenance | \$0 | \$0 |
| Food | \$0 | \$0 |
| Clothing | \$0 | \$0 |
| Laundry | \$0 | \$0 |
| Medical and dental | \$0 | \$0 |
| Transportation | \$0 | \$0 |
| Recreation | \$0 | \$0 |

Insurance

| | | |
|--------------------------|-----|-----|
| Homeowner's or Renter's. | \$0 | \$0 |
| Life | \$0 | \$0 |
| Health | \$0 | \$0 |
| Motor vehicle. | \$0 | \$0 |
| Taxes | \$0 | \$0 |

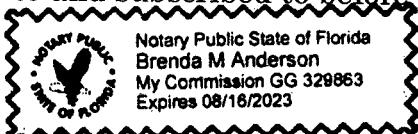
Installment payments

| | | |
|------------------------|-----|-----|
| Motor vehicle. | \$0 | \$0 |
| Credit Cards. | \$0 | \$0 |
| Department stores | \$0 | \$0 |
| Alimony and support | \$0 | \$0 |
| Business expenses | \$0 | \$0 |
| Total monthly expenses | \$0 | \$0 |

9. Do you expect any major changes to your monthly income or expenses or in your assets and liabilities during the next 12 months? No
10. Have you paid an attorney any money for services in connection with this case? No
11. Have you paid anyone other than an attorney any money for services in connection with this case? No
12. Provide any other information that will help explain why you cannot pay the costs of this case.

I, David P. Moran, have been incarcerated since May 13th 2016. On this date I lost all of my property and assets. I own nothing of substantial value except for collections left unpaid due to my incarceration. I authorize a lien to be placed against my account until this cost is paid.

Sworn to and subscribed to before me this 26th day of December, 2019.



Brenda M. Anderson commission expires: August 16, 2023

Notary Public, State of Florida

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

Executed on December 26th, 2019.

/s/ D. Moran
David P. Moran X97428
Pro Se Litigant