

19-7253  
No. \_\_\_\_\_

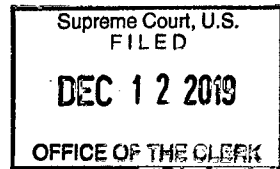
ORIGINAL

\_\_\_\_\_  
IN THE  
SUPREME COURT OF THE UNITED STATES  
\_\_\_\_\_

\_\_\_\_\_  
FABRIZIO DEFRANCISCI,  
PETITIONER,

vs.

UNITED STATES OF AMERICA,  
RESPONDENT.  
\_\_\_\_\_



\_\_\_\_\_  
ON PETITION FOR A WRIT OF CERTIORARI TO  
THE SECOND CIRCUIT COURT OF APPEALS  
\_\_\_\_\_

\_\_\_\_\_  
MOTION FO RLEAVE TO PROCEED in forma pauperis  
WITH SUPPORTING DECLARATION  
\_\_\_\_\_

Fabrizio Defrancisci, pro se  
Reg. #57336-053  
LSCI Allenwood  
P.O. Box 1000  
White Deer, PA 17887-1000

AND NOW COMES Fabrizio Defrancisci, Petitioner, and hereby respectfully submits his Motion for Leave to Proceed in forma pauperis and to file his attached Petition for Writ of Certiorari, with accompanying documentation(s), without prepayment of fees and costs.

In support of said Leave, Petitioner Defrancisci submits that he has been Granted in forma pauperis status in the below listed courts:

1. United States District Court of the Eastern District of New York, 225 Cadman Plaza East, Brooklyn, New York, 11201;
2. United States Court of Appeals for the Second Circuit, Foley Square, New York, NY 10007.

In further support of this Motion, Petitioner submits his Affidavit or Declaration in support, as attached and excuted under the pains of perjury.

WHEREFORE, PETITIONER PRAYS THAT THIS COURT WILL GRANT HIM in forma pauperis status and permit his filing without prepayment of fees or costs.

*Fabrizio DeFrancisci*  
Fabrizio Defrancisci, pro se  
Reg. #57336-053  
LSCI Allenwood  
P.O. Box 10000  
White Deer, PA 17887-1000

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

I, Fabrizio Defrancisci, 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 therefor; 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	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Self-employment	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Income from real property (such as rental income)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Interest and dividends	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Gifts	\$ 300. <sup>00</sup>	\$ N/A	\$ 300. <sup>00</sup>	\$ N/A
Alimony	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Child Support	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Disability (such as social security, insurance payments)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Unemployment payments	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Public-assistance (such as welfare)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Other (specify): _____	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
<b>Total monthly income:</b>	\$ 300. <sup>00</sup>	\$ N/A	\$ 300. <sup>00</sup>	\$ N/A

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 pay
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	Dates of Employment	Gross monthly pay
N/A			\$
			\$
			\$

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.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
N/A	\$	\$
	\$	\$
	\$	\$

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

☐ Home N/A  
Value 0.00

☐ Other real estate N/A  
Value 0.00

☐ Motor Vehicle #1 N/A  
Year, make & model  
Value 0.00

☐ Motor Vehicle #2 N/A  
Year, make & model  
Value 0.00

☐ Other assets N/A  
Description  
Value 0.00

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**

N/A

\$

\$

\$

\$

\$

\$

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

**Name**

**Relationship**

**Age**

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, or annually to show the monthly rate.

**You**

**Your spouse**

Rent or home-mortgage payment  
(include lot rented for mobile home)

\$ 0.00

\$ N/A

Are real estate taxes included? ☐ Yes ☐ No N/A

Is property insurance included? ☐ Yes ☐ No N/A

Utilities (electricity, heating fuel,  
water, sewer, and telephone)

\$ 0.00

\$ N/A

Home maintenance (repairs and upkeep)

\$ 0.00

\$ N/A

Food

\$ 0.00

\$ N/A

Clothing

\$ 0.00

\$ N/A

Laundry and dry-cleaning

\$ 0.00

\$ N/A

Medical and dental expenses

\$ 0.00

\$ N/A

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ 0.00	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$ N/A
<b>Insurance (not deducted from wages or included in mortgage payments)</b>		
Homeowner's or renter's	\$ 0.00	\$ N/A
Life	\$ 0.00	\$ N/A
Health	\$ 0.00	\$ N/A
Motor Vehicle	\$ 0.00	\$ N/A
Other: _____	\$ 0.00	\$ N/A
<b>Taxes (not deducted from wages or included in mortgage payments)</b>		
(specify): _____	\$ 0.00	\$ N/A
<b>Installment payments</b>		
Motor Vehicle	\$ 0.00	\$ N/A
Credit card(s)	\$ 0.00	\$ N/A
Department store(s)	\$ 0.00	\$ N/A
Other: _____	\$ 0.00	\$ N/A
Alimony, maintenance, and support paid to others	\$ 0.00	\$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ N/A
Other (specify): _____	\$ 0.00	\$ N/A
<b>Total monthly expenses:</b>	\$ 0.00	\$ 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 paid – or will you 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? \_\_\_\_\_

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 costs of this case.

I state that I continue to believe that my case/issues have merit and that they warrant this Honorable Court precious resources to not only correct the structural error of my Presentece Reoprt, but to maintain the reputation of the Appeals as they have not faithfully given me my due process by not ruling on all my pending pleadings in that Court prior to ruling on my C.O.A.

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

Executed on: December 11, 2019

Fabrizio De Francisci

(Signature)

Fabrizio Defrancisci, pro se