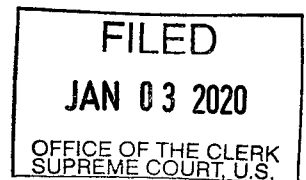


NO. 19-7283

IN THE
SUPREME COURT OF THE
UNITED STATES

ORIGINAL

FAIRLY W. EARLS,
PETITIONER-APPELLANT,
V.
SUSAN NOVAK,
RESPONDENT-APPELLEE.



MOTION TO PROCEED
IN FORMA PAUPERIS

Pursuant to Supreme Court Rule 39 (proceeding in forma pauperis) and in compliance with Rule 21, wherein the Petitioner Fairly W. Earls seeks leave to proceed on the Writ of Certiorari in this Court in forma pauperis status.

The Petitioner is indigent and cannot pay the filing fee to commence this Action, nor does the petitioner have employment to assist on the paying of the filing fee. The Petitioner submits with this Motion a Sworn Affidavit with form 4 listing assests and debts.

Dated: 01-02-2020

Sincerely,

Fairly W. Earls

Fairly W. Earls
Columbia Correctional
P.O. Box 900
Portage, WI. 53901

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

I, Fairly W. Earls, 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	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Self-employment	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Income from real property (such as rental income)	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Interest and dividends	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Gifts	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Alimony	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Child Support	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>341.00</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Disability (such as social security, insurance payments)	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Unemployment payments	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Public-assistance (such as welfare)	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Other (specify): <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>
Total monthly income:	\$ <u>341.00</u>	\$ <u>None</u>	\$ <u>None</u>	\$ <u>None</u>

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
None	None	None	\$ None
			\$
			\$

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
No Spouse	No Spouse	No Spouse	\$ No Spouse
			\$
			\$

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	None	\$ None	\$ None
		\$	\$
		\$	\$

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

☐ Home No
Value None

☐ Other real estate None
Value None

☐ Motor Vehicle #1 No
Year, make & model None
Value None

☐ Motor Vehicle #2 No
Year, make & model None
Value None

☒ Other assets

Description Release Account
Value 1124.00

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
None	\$ None	\$ None
None	\$ None	\$ None
None	\$ None	\$ None

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

Name	Relationship	Age
None	None	None
None	None	None
None	None	None

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)	\$ None	\$ None
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)	\$ None	\$ None
Home maintenance (repairs and upkeep)	\$ None	\$ None
Food	\$ 70.00	\$ None
Clothing	\$ None	\$ None
Laundry and dry-cleaning	\$ None	\$ None
Medical and dental expenses	\$ None	\$ None

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ None	\$ None
Recreation, entertainment, newspapers, magazines, etc.	\$ None	\$ None
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ None	\$ None
Life	\$ None	\$ None
Health	\$ None	\$ None
Motor Vehicle	\$ None	\$ None
Other: None	\$ None	\$ None
Taxes (not deducted from wages or included in mortgage payments)		
(specify): None	\$ None	\$ None
Installment payments		
Motor Vehicle	\$ None	\$ None
Credit card(s)	\$ None	\$ None
Department store(s)	\$ None	\$ None
Other: None	\$ None	\$ None
Alimony, maintenance, and support paid to others		
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ None	\$ None
Other (specify): None	\$ None	\$ None
Total monthly expenses:	\$ 70.00	\$ None

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? None

If yes, state the attorney's name, address, and telephone number:

No

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? None

If yes, state the person's name, address, and telephone number:

No

12. Provide any other information that will help explain why you cannot pay the costs of this case.

Per Institution policy the Release Account cannot be used for filing fee's, the Institution has been in lockdown for the past three months with no library or recreation time out of cells. No institution jobs and all pay for those who do work has been suspended per the DOC. The amounts listed are estimates due to the lockdown and not receiving monthly statements.

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

Executed on: 01-02, 2020

Faine W. Kauls
(Signature)