

No. **19-7496**

In The  
SUPREME COURT OF THE UNITED STATES

GARRY DEAN STRONER,

Vs.

LORIE DAVIS, DIRECTOR, TDCJ-CRD

PETITIONER  
**ORIGINAL**

RESPONDENT

FILED

JAN 08 2020

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

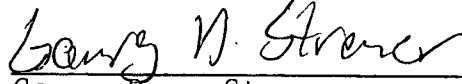
The Petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed in forma pauperis.

Please check the appropriate boxes:

- ☒ [X] Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s): (1) Northern District Court for the Dallas Division in Texas; and (2) The Fifth Circuit Court of Appeals in New Orleans.
- ☐ [] Petitioner has not previously been granted leave to proceed in forma pauperis in any other court.
- ☒ [X] Petitioner's affidavit or declaration in support of this motion is attached hereto.
- ☐ [] Petitioner's affidavit or declaration is not attached because the court below appointed counsel in the current proceeding, and:
- ☐ [] The appointment was made under the following provision of law: N/A, or,

[ ] a copy of the order of appointment is appended.

Respectfully Submitted,

A handwritten signature in cursive script, reading "Garry N. Stroner", is written over a horizontal line.

Garry Dean Stroner  
TDCJ #01777671 - Coffield Unit  
2661 FM 2054  
Tennessee Colony, Texas 75884  
Pro se litigant.

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

I, Garry Dean Stroner, 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, bi-weekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

<u>INCOME SOURCE</u>	<u>AVERAGE MONTHLY AMOUNT</u>		<u>AMOUNT EXPECTED</u>	
	<u>DURING PAST 12 MONTHS</u>		<u>NEXT</u>	<u>MONTH</u>
	YOU	SPOUSE	YOU	SPOUSE
Employment	\$00.00	\$00.00	\$00.00	\$00.00
Self-employment	\$00.00	\$00.00	\$00.00	\$00.00
Income from real property (such as rental income)	\$00.00	\$00.00	\$00.00	\$00.00
Interest and dividends	\$00.00	\$00.00	\$00.00	\$00.00
Gifts	\$80.00	\$00.00	\$80.00	\$00.00
Alimony	\$00.00	\$00.00	\$00.00	\$00.00
Child Support	\$00.00	\$00.00	\$00.00	\$00.00
Retirement (such as social security, pensions, annuities, insurance)	\$00.00	\$00.00	\$00.00	\$00.00
Disability (such as social security, insurance payments)	\$00.00	\$00.00	\$00.00	\$00.00
Unemployment payments	\$00.00	\$00.00	\$00.00	\$00.00
Public-assistance (such as welfare)	\$00.00	\$00.00	\$00.00	\$00.00

Other (specify):  
 N/A \$00.00 \$00.00 \$00.00 \$00.00

TOTAL MONTHLY  
 INCOME: \$80.00 \$00.00 \$80.00 \$00.00

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.).

<u>EMPLOYER</u>	<u>ADDRESS</u>	<u>DATES OF EMPLOYMENT</u>	<u>GROSS MONTH- LY PAY</u>
None (been incarcerated)	N/A	N/A	\$00.00

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.).

<u>EMPLOYER</u>	<u>ADDRESS</u>	<u>DATES OF EMPLOYMENT</u>	<u>GROSS MONTHLY PAY</u>
N/A	N/A	N/A	\$00.00

4. How much cash do you and your spouse have? \$00.00  
 Below, state any money you or your spouse have in bank accounts or in any other financial institution.

<u>TYPE OF ACCOUNT (E.G, CHECKING OR SAVINGS)</u>	<u>AMOUNT YOU HAVE</u>	<u>AMOUNT YOUR SPOUSE HAS</u>
Trust Fund in TDCJ-GID	\$140.00	\$00.00

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

<input type="checkbox"/> Home Value: N/A	<input type="checkbox"/> Other real estate Value: N/A
<input type="checkbox"/> Motor Vehicle #1 Year, Make & model: N/A Value: N/A	<input type="checkbox"/> Motor Vehicle #2 Year, Make & model: N/A Value: N/A
<input type="checkbox"/> Other assets Description: None Value: N/A	

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

<u>PERSON OWING YOU OR YOUR SPOUSE MONEY</u>	<u>AMOUNT OWED TO YOU</u>	<u>AMOUNT OWED TO YOUR SPOUSE</u>
None	\$00.00	\$00.00

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").

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>AGE</u>
None	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, or annually to show the monthly rate.

	<u>YOU</u>	<u>YOUR SPOUSE</u>
Rent or home-mortgage payment (include lot rented for mobile home)	\$00.00	\$00.00
Are Real estate taxes included? N/A		
Is property insurance included? N/A		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$00.00	\$00.00
Home maintenance (repairs and unkeep)_	\$00.00	\$00.00
Food	\$35.00	\$00.00
Clothing	\$02.00	\$00.00
Laundry and dry-cleaning	\$00.00	\$00.00
Medical and dental expenses	\$08.00	\$00.00
Transportation (not including motor vehicle payments)	\$00.00	\$00.00
Recreation, entertainment, newspapers, magazines, etc.	\$00.00	\$00.00
Insurance (not deducted from wages or included in mortgage payments).		
Homeowner's or renter's	\$00.00	\$00.00

	<u>YOU</u>	<u>YOUR SPOUSE</u>
Life	\$00.00	\$00.00
Health	\$00.00	\$00.00
Motor Vehicle	\$00.00	\$00.00
Other: N/A	\$00.00	\$00.00
Taxes (not deducted from wages or included in mortgage payments).		
(specify): N/A	\$00.00	\$00.00
Installment payments		
Motor Vehicle	\$00.00	\$00.00
Credit card(s)	\$00.00	\$00.00
Department store(s)	\$00.00	\$00.00
Other: N/A	\$00.00	\$00.00
Alimony, maintenance, and support paid to others	\$00.00	\$00.00
Regular expenses for operation of business, profession, or farm (attach detailed statement).	\$00.00	\$00.00
Other (specify): postage, legal research, and correspondence materials.	\$30.00	\$00.00
<b>Total monthly expenses:</b>	<b>\$70.00</b>	<b>\$00.00</b>

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: N/A

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? N/A

If yes, state the attorney's name, address, and telephone Number: N/A

11. Have you paid - or will you be paying - anyone other than an attorney (such as a paralegal or a typist) any money for ser-

VICES in connection with this case, including the completion of this form?

☐ Yes ☒ No.

If yes, how much? N/A

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

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

The gifts that I receive is from family and friends that goes toward food, clothing, medical, dental expenses, legal correspondence, legal research, and postage expenses.

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

Executed on: January 8, 2020.

Garry D Stroner  
Garry Dean Stroner  
TDCJ #01777671 - Coffield Unit  
2661 FM 2054  
Tennessee Colony, Texas 75884  
Pro se litigant.