

19-7653

No. 7062

ORIGINAL

IN THE  
SUPREME COURT OF THE UNITED STATES

Roosevelt Bigbee Jr. — PETITIONER  
(Your Name)

Supreme Court, U.S.  
FILED  
JAN - 7 2020  
OFFICE OF THE CLERK

VS.

Jonathan Lebo, Warden — RESPONDENT(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:

Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

Circuit Court for Lauderdale County Tenn.

Court of Criminal Appeal of Tenn. at Jackson Tenn.

Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

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: \_\_\_\_\_  
\_\_\_\_\_, or

a copy of the order of appointment is appended.

Roosevelt Bigbee  
(Signature)

RECEIVED

FEB 12 2020

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, Roosevelt B. Bisee, 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>10.00</u>	\$ <u>X</u>	\$ <u>420.00</u>	\$ <u>X</u>
Self-employment	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Income from real property (such as rental income)	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Interest and dividends	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Gifts	\$ <u></u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Alimony	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Child Support	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Disability (such as social security, insurance payments)	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Unemployment payments	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Public-assistance (such as welfare)	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Other (specify): <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>	\$ <u>X</u>
Total monthly income:	\$ <u>X</u>	\$ <u>X</u>	\$ <u>420.00</u>	\$ <u>X</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
<u>West Tenn. Correctional Facility</u>	<u>W.T.S.P. P.O. Box 1150 Huntington, TN 38041</u>	<u>Jan. 17, 2020</u>	<u>\$ 20.00</u>
			<u>\$</u>
			<u>\$</u>
			<u>\$</u>

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
<u> </u>	<u> </u>	<u> </u>	<u>\$</u>
<u> </u>	<u> </u>	<u> </u>	<u>\$</u>
<u> </u>	<u> </u>	<u> </u>	<u>\$</u>

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.

Financial institution	Type of account	Amount you have	Amount your spouse has
<u> </u>	<u> </u>	<u>\$</u>	<u>\$</u>
<u> </u>	<u> </u>	<u>\$</u>	<u>\$</u>
<u> </u>	<u> </u>	<u>\$</u>	<u>\$</u>

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  
Year, make & model     
Value  

Motor Vehicle #2  
Year, make & model     
Value  

Other assets  
Description     
Value

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**

A hand-drawn 'X' mark is drawn across three horizontal lines. The 'X' is formed by two lines that intersect in the center. The top-left line curves upwards and to the right, while the bottom-right line curves upwards and to the left. The top-right line curves downwards and to the left, while the bottom-left line curves downwards and to the right. The three horizontal lines are evenly spaced and intersect the 'X' at their midpoints.

66

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

<b>Name</b>	<b>Relationship</b>	<b>Age</b>
<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

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.

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

\$ ~~X~~

es

Are real estate taxes included?  Yes  No  
Is property insurance included?  Yes  No

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

99 X 99 X

### Home maintenance (repairs and upkeep)

✓ 99 ✓ 99

## Food

88 X 89 X

## Clothing

66 X 66 X

## Laundry and dry-cleaning

\$ X \$ X

#### Medical and dental expenses

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

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've been imprisoned for 29 years of my 42 years of life. living*

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

Executed on: Feb. 3, 2020

Roosevelt Bigbee  
(Signature)



60-14

**State of Tennessee  
DEPARTMENT OF CORRECTION  
West Tennessee State Penitentiary  
P.O. Box 1150  
Henning, Tennessee 38041-1150  
Telephone (731) 738-5044 FAX (731) 738-5044**

**PRISON TRUST FUND AFFIDAVIT**

**Roosevelt Bigbee**  
**Inmate name**

**142829**  
**TDOC no.**

**NOTICE TO PRISONER:** a prisoner seeking to proceed IFP (In Forma Pauper) shall submit an affidavit stating all assets. In addition, a prisoner 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.

**CERTIFICATE**

(Incarcerated applicants only)  
(To be completed by the institution of incarceration)

I certify that the applicant named herein has the sum of \$7.85 on account to his credit at West Tennessee State Penitentiary. I further certify that the applicant has the securities to his credit N/A. I further certify that during the past six months the applicant's average deposits were \$75.00.

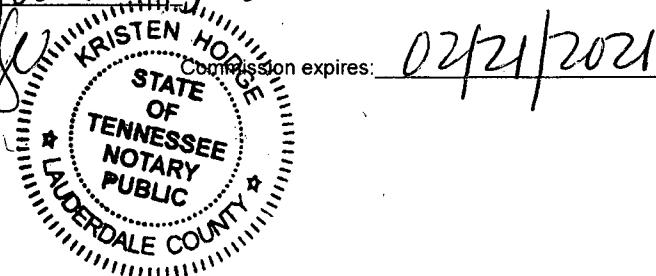
I, Asmaa Abdalla, am a State of Tennessee employee, who serves as the Inmate Trust Fund Custodian for prisoners at West Tennessee State Penitentiary. By my signature below, I certify that the attached computer printout of the named prisoner is true and correct in designating his trust account activity for the past six (6) months with the Department of Correction.

01/15/20  
Date

Signature of Authorized Officer; Trust Fund Custodian

Sworn before me this 15 day of January 2020

Kristen Hodge  
Notary



LTFE  
BI41BFA

TRUST FUND TRANSACTIONS  
SELECT

DATE: 01/15/20  
TIME: 09:08

Account: 00142829 BIGBEE, ROOSEVELT JR  
Status: ACTV Sex: M Race: B Age: 49  
Current Balance: 7.85 Pending Balance: 50.00  
Actual Site: WTSP  
Assigned Site: WTSP

S	Trans Date	Seq No	Transaction Type/Code/Amount	Trans Site	Current Amount	Pend Amount
	01/15/2020	1	C VPC	50.00 WTSP	7.85	50.00
	01/14/2020	1	D COP	1.65 WTSP	7.85	
	01/10/2020	1	C CAN	3.00 WTSP	9.50	
	01/08/2020	1	D NOT	4.00 WTSP	6.50	
	12/19/2019	1	D COM	29.03 WTSP	10.50	
	12/11/2019	1	D COM	26.87 WTSP	39.53	
	12/03/2019	1	D COM	12.72 WTSP	66.40	
	11/22/2019	1	D COM	22.85 WTSP	79.12	
	11/19/2019	1	D OBI	3.00 WTSP	101.97	
	11/18/2019	1	D COM	15.91 WTSP	104.97	

Search:

NEXT FUNCTION: DATA:

F1-HELP F8-PAGEDOWN F9-QUIT F11-SUSPEND

TOP OF LIST

LTFE  
BI41BFA

TRUST FUND TRANSACTIONS  
SELECT

DATE: 01/15/20  
TIME: 09:08

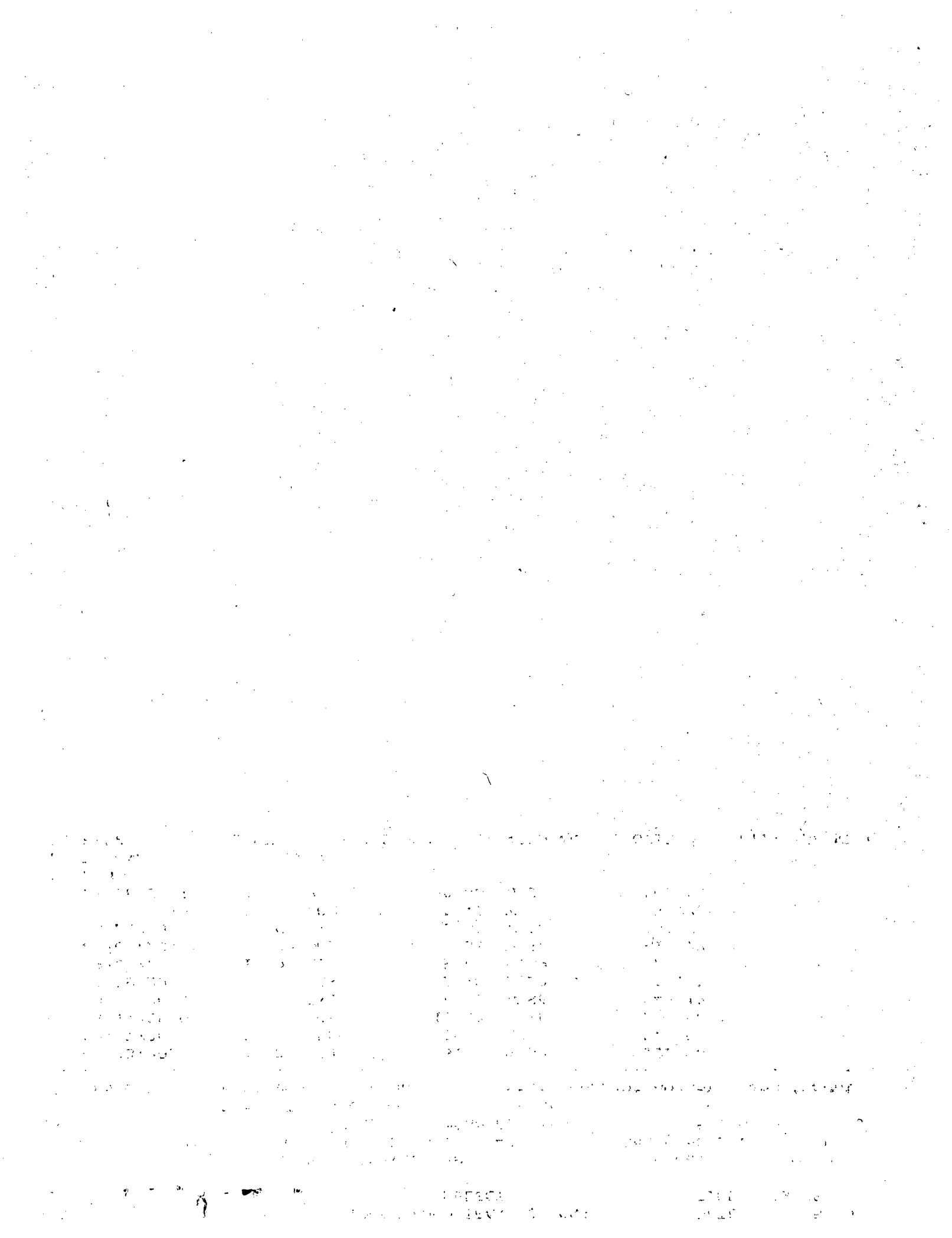
Account: 00142829 BIGBEE, ROOSEVELT JR Actual Site: WTSP  
Status: ACTV Sex: M Race: B Age: 49 Assigned Site: WTSP  
Current Balance: 7.85 Pending Balance: 50.00

S	Trans Date	Seq	Transaction	Trans	Site	Current Amount	Pend Amount
		No	Type/Code/Amount				
	11/12/2019	1	D COM	25.09	WTSP	120.88	
	11/08/2019	1	D CBL	3.00	WTSP	145.97	
	11/04/2019	1	D COM	4.85	WTSP	148.97	
	10/28/2019	1	D COM	21.06	WTSP	153.82	
	10/21/2019	1	D COM	35.94	WTSP	174.88	
	10/15/2019	2	D CBL	3.00	WTSP	210.82	
	10/15/2019	1	C VPC	50.00	WTSP	213.82	
	10/11/2019	1	D COM	15.34	WTSP	163.82	
	10/09/2019	1	D MED	3.00	WTSP	179.16	
	10/01/2019	1	D COM	10.64	WTSP	182.16	

Search:

NEXT FUNCTION: DATA:

**F1-HELP**    **F4-FIRST**    **F7-PAGE UP**    **F8-PAGEDOWN**    **F9-QUIT**    **F11-SUSPEND**



LTFE  
BI41BFA

TRUST FUND TRANSACTIONS  
SELECT

DATE: 01/15/20  
TIME: 09:08

Account: 00142829 BIGBEE, ROOSEVELT JR Actual Site: WTSP  
Status: ACTV Sex: M Race: B Age: 49 Assigned Site: WTSP  
Current Balance: 7.85 Pending Balance: 50.00

S	Trans Date	Seq No	Transaction		Trans Site	Current Amount	Pend Amount
			Type	Code/Amount			
	09/23/2019	1	D	COM	35.70	WTSP	192.80
	09/17/2019	2	D	CBL	3.00	WTSP	228.50
	09/17/2019	1	D	COM	10.62	WTSP	231.50
	09/12/2019	1	D	INC	24.00	WTSP	242.12
	09/09/2019	2	D	POS	3.20	WTSP	266.12
	09/09/2019	1	D	COM	43.45	WTSP	269.32
	09/06/2019	1	D	OBI	39.95	WTSP	312.77
	08/28/2019	1	C	VIC	300.00	WTSP	352.72
	08/26/2019	2	D	COM	10.47	WTSP	52.72
	08/26/2019	1	C	VIC	50.00	WTSP	63.19

Search:

NEXT FUNCTION: DATA:

F1-HELP F4-FIRST F7-PAGE UP F8-PAGEDOWN F9-QUIT F11-SUSPEND



LTFE  
BI41BFA

TRUST FUND TRANSACTIONS  
SELECT

DATE: 01/15/20  
TIME: 09:08

Account: 00142829 BIGBEE, ROOSEVELT JR Actual Site: WTSP  
Status: ACTV Sex: M Race: B Age: 49 Assigned Site: WTSP  
Current Balance: 7.85 Pending Balance: 50.00

S	Trans Date	Seq No	Transaction		Trans Site	Current Amount	Pend Amount
			Type	Code/Amount			
	08/15/2019	2	D	CBL	3.00	WTSP	13.19
	08/15/2019	1	C	COC	1.33	WTSP	16.19
	08/06/2019	1	D	COM	29.60	WTSP	14.86
	07/23/2019	1	D	COM	36.78	WTSP	44.46
	07/16/2019	1	D	COM	68.74	WTSP	81.24
	07/09/2019	1	D	COM	24.50	WTSP	149.98
	07/08/2019	1	C	VIC	100.00	WTSP	174.48
	07/05/2019	1	C	VPC	50.00	WTSP	74.48
	07/03/2019	1	D	COM	51.71	WTSP	24.48
	06/25/2019	1	D	COM	29.72	WTSP	76.19

Search:

NEXT FUNCTION: DATA:

F1-HELP F4-FIRST F7-PAGE UP F8-PAGEDOWN F9-QUIT F11-SUSPEND