

No. 19-8122

Supreme Court, U.S.
FILED

MAR 12 2020

OFFICE OF THE CLERK

IN THE
SUPREME COURT OF THE UNITED STATES

ALLAN WINDFIELD ^{PRO-SE} — PETITIONER
(Your Name)

VS.

ATTORNEY GEN OF KENTUCKY — 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*.

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

☒ 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.

ALLAN WINDFIELD ^{PRO-SE}
(Signature)

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

I, ALAN WEDDIFIELD, 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>75.00</u>	\$ <u>75.00</u>	\$ <u>75.00</u>	\$ <u>75.00</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>VAR. 200</u>	\$ <u>VAR. 200</u>	\$ <u>VAR. 200</u>	\$ <u>VAR. 200</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>75.00</u>	\$ <u>75.00</u>	\$ <u>75.00</u>	\$ <u>75.00</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
KENTUCKY DEPT OF CORRECTIONS	GRCL CENTRAL CITY KENTUCKY	12-2016 TO PRESENT	\$ 75.00 \$ \$

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.)

Employer	Address	Dates of Employment	Gross monthly pay
KENTUCKY DEPT OF CORRECTIONS	KWILL PENNSIE VALLEY KENTUCKY	6-2015 TO PRESENT	\$ 75.00 \$ \$

4. How much cash do you and your spouse have? \$ 0-\$50.
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
0	0 NA	\$ 0	\$ 0
		\$	\$
		\$	\$

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

☒ Home
Value LESS THAN \$10,000

☒ Other real estate
Value N/A

☒ Motor Vehicle #1
Year, make & model 2001 FORD F150
Value <\$3000.

☒ Motor Vehicle #2 1997
Year, make & model DODGE 1500
Value <\$500.

☐ Other assets
Description NA
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
<u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

Name	Relationship	Age
<u>NONE</u>	<u>N/A</u>	<u>N/A</u>
_____	_____	_____
_____	_____	_____

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)	\$ <u>0</u>	\$ <u>0</u>
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)	\$ <u>70. MONTH</u>	\$ <u>70. MONTH</u>
Home maintenance (repairs and upkeep)	\$ <u>VARIES</u>	\$ <u>VARIES</u>
Food	\$ <u>\$200.</u>	\$ <u>\$200.</u>
Clothing	\$ <u>\$20</u>	\$ <u>\$20</u>
Laundry and dry-cleaning	\$ <u>\$10</u>	\$ <u>\$10</u>
Medical and dental expenses	\$ <u>\$6</u>	\$ <u>\$6</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>10.</u>	\$ <u>10.</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>VARIES</u>	\$ <u>VARIES</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>PROPERTY</u>	\$ <u>130. ^{RENTS} 11. MN</u>	\$ <u>130. ^{RENTS} 11. MN</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit card(s)	\$ <u>0</u>	\$ <u>0</u>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>0</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>0</u>
Total monthly expenses:	\$ <u>327.</u>	\$ <u>327.</u>

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? \$60,000 + AT THIS POINT.

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

\$25,000 BILL BARBER OWENSBORO, KY

\$10,000 RICK HARDEN HARDINSBURG, KY

\$25,000 DAX WOMACK HENDERSON, KY

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

ACW

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.
BOTH ME AND MY SPOUSE ARE IN PRISON. WE HAVE USED UP OUR SAVINGS TRYING TO FIND A HONEST JUDGE AND COURT TO WATCH THE COLOR VIDEO OF THE POLICE BRINGING THE DRUGS INTO OUR HOUSE. THE VERY THING WE ARE IN PRISON FOR, AND THE THEFT OF FIREARMS BY THE POLICE.
I declare under penalty of perjury that the foregoing is true and correct.

Executed on: MARCH 8TH, 2020

Allen W. [Signature]
(Signature)

PRO
SE

**COMMONWEALTH OF KENTUCKY
DEPARTMENT OF CORRECTIONS**

Green River Correctional Complex
(Institution)

**CERTIFICATION OF FUNDS DEPOSITED IN
PRISONER'S INSTITUTIONAL ACCOUNT**

Inmate Name: Allan Widdifield

Institutional I.D. Number: 263693

I, Melissa Latham, of the Green River Correctional Complex
(Institution)

Inmate Accounts Office do hereby certify that the sum of
\$1,645.28 has been deposited to this inmate's account during the
preceding 6 months.

Melissa Latham
Signature of Authorized Officer

10/02/2019
Date

UNITED STATES COURT OF APPEALS
FOR THE SIXTH CIRCUIT

ALLAN WIDDIFIELD, aka Alan
Widdifield, aka Allan Widdlefield

Petitioner - Appellant

v.

Case No: 19-6147

(asm)

KEVIN MAZZA, Warden

Respondent - Appellee

MOTION FOR PAUPER STATUS

I move to waive the payment of the appellate filing fee under Fed. R. App. P. 24 because I am a pauper. This motion is supported by the attached financial affidavit.

The issues which I wish to raise on appeal are:

- I. LISTED ON APPLICATION FOR C.O.A
- II. AEDPA - 1 YR STATUTE, 11.42 COLLATERAL ACTION
- III. EQUITABLE TOLLING OF THE STATUTE, PROVISIONS IN
HOLLAND ED. @ 28 USC 2244(D)(2) I.E. JULY, 7, 2018
- III. ACTUAL INNOCENCE @ 28 USC 2241
- III. MC. QUIGIN v PERKINS, 569 US. 383 2013

Signed: ALLAN WIDDIFIELD PRO-SE Date: 3-9-2020

Address: G.R.C. 6-BL2
P.O. BOX 9300
CENTRAL CITY, KY 42330

AFFIDAVIT ACCOMPANYING MOTION FOR PERMISSION TO APPEAL IN FORMA PAUPERIS

United States Court of Appeals
for the Sixth Circuit

ALLAN WIDDIFIELD, aka Alan Widdifield, aka Allan Widdlefield]
Petitioner - Appellant]

v.

KEVIN MAZZA, Warden]
Respondent - Appellee]

Case No: 19-6147

(asm)

Affidavit in Support of Motion

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. §§ 1746; 18 U.S.C. §§ 1621.)

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed: *Alan Widdifield* PRO SEDate: 3-8-2020

My issues on appeal are:

- | |
|--|
| <p>A. LISTED ON APPLICATION FOR C.O.A.</p> <p>B. AEDPA - 1 YR STATUTE & 11.42 COLLATERAL ACTION</p> <p>II. EQUITABLE TOLLING OF THE STATUTE. PROVISIONS IN HOLLAND Z.D. & 28 USC 2244(D)(2). IE JULY 17, 2018</p> <p>III. ACTUAL INNOCENCE & 28 USC 2241</p> <p>III. MCGUIGAN v PERKINS, 569 US 383-2013</p> |
|--|

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>75.</u>	<u>75.</u>	<u>75.</u>	<u>75.</u>
Self-employment	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Income from real property (such as rental income)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Interest and dividends	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Gifts	<u>200 VARIET</u>	<u>200 VARIET</u>	<u>0</u>	<u>0</u>
Alimony	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Child support	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Disability (such as social security, insurance payments)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Unemployment payments	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Public-assistance (such as welfare)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Other (specify): 	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Total monthly income:	<u>\$ 0.00</u>	<u>\$ 0.00</u>	<u>\$ 0.00</u>	<u>\$ 0.00</u>
	<u>75.</u>	<u>75.</u>	<u>75.</u>	<u>75.</u>

2. List your 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>KY. D.O.C.</u>	<u>G.R.C.L.</u>	<u>12-2016 to</u>	<u>\$ 75.</u>
<u></u>	<u>CENTRAL CITY, KY</u>	<u>PRESENT</u>	<u></u>
<u></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
KY. D.O.C.	KWIC	6-2015 TO	\$75.
	PEWEE VALLEY, KY	PRESENT	

4. How much cash do you and your spouse have? \$ 0 - \$50.

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
0	N-A	0	0

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you 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.

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 (Value)
LESS THAN \$10,000	N-A	APPROX \$30,000
		Make & year: 2001 FORD TRUCK
		Model: F150
		Registration #: N/A
Motor Vehicle #2 (Value)	Other assets (Value)	Other assets (Value)
LESS \$500	N-A	N/A
Make & year: 1997 DODGE TRUCK		
Model: 1500		
Registration #: N/A		

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
<u>NONE</u>	<u>0</u>	<u>0</u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>

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

Name	Relationship	Age
<u>NONE</u>	<u>N/A</u>	<u>N/A</u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></u>

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 payment (including lot rented for mobile home)	<u>0</u>	<u>0</u>
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)	<u>\$70.</u>	<u>\$70.</u>
Home maintenance (repairs and upkeep)	<u>VARIES</u>	<u>VARIES</u>
Food	<u>\$200.</u>	<u>\$200.</u>
Clothing	<u>20</u>	<u>20</u>
Laundry and dry-cleaning	<u>10</u>	<u>10</u>
Medical and dental expenses	<u>6</u>	<u>6</u>
Transportation (not including motor vehicle expenses)	<u>0</u>	<u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	<u>10</u>	<u>10</u>
Insurance (not deducted from wages or included in mortgage payments) Homeowner's or renter's	<u>VAR</u>	<u>VAR</u>
Life	<u>0</u>	<u>0</u>
Health	<u>0</u>	<u>0</u>
Motor vehicle	<u>0</u>	<u>0</u>
Other:	<u>NA</u>	<u>NA</u>
Taxes (not deducted from wages or included in mortgage payments) specify: <u>PROPERTY TAXES</u>	<u>1307.42</u> <u>\$11.</u>	<u>1307.42</u> <u>\$11.</u>
Installment payments	<u>0</u>	<u>0</u>
Motor Vehicle	<u>0</u>	<u>0</u>
Credit card (name): <u></u>	<u>0</u>	<u>0</u>
Department store (name): <u></u>	<u>0</u>	<u>0</u>
Other:	<u>0</u>	<u>0</u>
Alimony, maintenance, and support paid to others	<u>0</u>	<u>0</u>
Regular expenses for operation of business, profession, or farm (attach detail)	<u>0</u>	<u>0</u>
Other (specify): <u></u>	<u>0</u>	<u>0</u>
Total monthly expenses:	<u>\$ 0.00</u> <u>\$327.00</u>	<u>\$ 0.00</u> <u>\$327.00</u>

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 spent or will you be spending any money for expenses or attorney fees in connection with this lawsuit?

☒

Yes

☐

No

If yes, how much? \$

\$25,000 BILL BARGER - OWENSBORO, KY

\$10,000 RICK HARDIN - HARDINSBURG, KY

\$25,000 DAX WOMACK - HENDERSON, KY

11. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

MY SPOUSE AND I ARE BOTH IN PRISON. WE HAVE PAID TO LAWYERS & COURT COSTS ALL OF OUR SAVINGS TRYING TO FIND A SOURCE TO WATCH THE COLOR VIDEO OF THE POLICE BRINGING THE DRUGS & PLANTING THEM IN OUR HOUSE, THE VERY THING WE ARE IN PRISON FOR.

12. State the address of your legal residence.

GREEN RIVER CORRECTIONAL COMPLEX
DORM 6-BL2
ROB019300
CENTRAL CITY, KY 42330

Your daytime phone number: (N/A) PRISON

Your age: 48

Your years of schooling: 12 +

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing Notice of Appeal has been mailed, first class postage paid to the following:

Hon. Andy Beshear, Attorney General of Kentucky
Office of Criminal Appeals
1024 Capitol Center Drive
Frankfort, KY 40601

Dated this 8 day of MARCH, 2020.

Allan Widdiefield
Allan Widdiefield, Pro Se