

19-8396

Supreme Court, U.S.

FILED

AUG 05 2019

OFFICE OF THE CLERK

IN THE  
SUPREME COURT OF THE UNITED STATES

No. \_\_\_\_\_

ROBERT HILL,

Petitioner;

v.

ADMINISTRATOR NEW JERSEY STATE, ET AL.,

Respondent.

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On Petition For A Writ Of Certiorari  
To The United States Court of Appeals  
For The Third Circuit

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**MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS**

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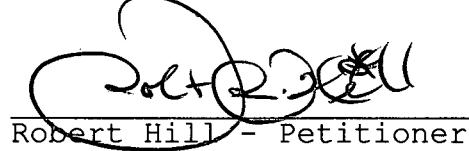
The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed in forma pauperis.

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

NEW JERSEY SUPERIOR COURT-LAW DIVISION, NEW JERSEY SUPERIOR COURT-APPELLATE DIVISION, NEW JERSEY SUPREME COURT, UNITED STATES DISTRICT COURT FOR THE THIRD CIRCUIT, UNITED STATES COURT OF APPEALS FOR THE THIRD CIRCUIT

Petitioner's declaration in support of this motion is attached hereto.

Dated: August 6, 2019

  
Robert Hill - Petitioner

**ORIGINAL**

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OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, Robert Hill, 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 cost of this case or to give security therefor; and I believe I am entitled to redress.

1. For both you and your spouse 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.

<b>INCOME SOURCE</b>	<b>AVERAGE MONTHLY AMOUNT DURING THE PAST 12 MONTHS</b>		<b>AMOUNT EXPECTED NEXT MONTH</b>	
	<b>You</b>	<b>Your Spouse</b>	<b>You</b>	<b>Your Spouse</b>
Employment	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Self-Employment	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Income from real Property (Such as rental income)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Interest and Dividends	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Gifts	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Alimony	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Child Support	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Unemployment payments	\$ N/A	\$ N/A	\$ N/A	\$ N/A

Disability (such as social security, insurance payments)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Public Assistance (such as welfare)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Other (specify): Prison	\$ _____	\$ N/A	\$ N/A	\$ N/A
Total monthly income	\$ _____	\$ N/A	\$ N/A	\$ N/A

2. List your employment history, most recent employer 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, 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 spouse have in bank accounts  
or in any other financial institution.

Financial Institution	Type of Account	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  
furnishing.

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

N/A	_____	_____	_____
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7. State the persons who rely on you or your spouse for support.

N/A	_____	_____	_____
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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.

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? NO

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? NO

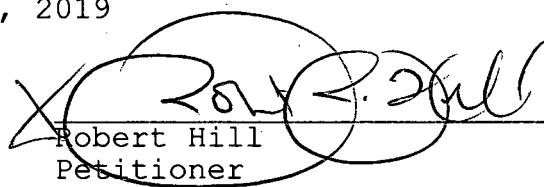
11. Have you paid - or will you be paying - anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form? NO

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

I am a prisoner housed at New Jersey State Prison, in Trenton, New Jersey and I only received state-pay which is \$\_\_\_\_\_.00 a month, which fines is deducted from that and what is left I have to buy my own hygiene products, such as (toothpaste, deodorant, soap etc.)

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

Executed on: Aug 27<sup>th</sup>, 2019

  
Robert Hill  
Petitioner