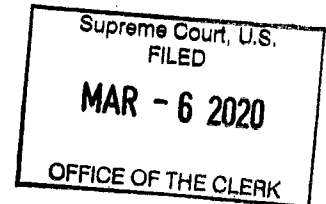


No. **19-8547**

**ORIGINAL**

IN THE  
SUPREME COURT OF THE UNITED STATES

Joseph D. Blueford — PETITIONER  
(Your Name)



VS.

Timothy Hooper — RESPONDENT(S)  
WARDEN

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):

U.S. Court of Appeals For The Fifth Circuit  
U.S. District Court Western District of Louisiana,  
MONROE DIVISION

☐ 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.

Joseph Blueford  
(Signature)

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

I, Joseph Blueford, 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>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Self-employment	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Interest and dividends	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Gifts	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Alimony	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Child Support	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Unemployment payments	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</u>
<b>Total monthly income:</b>	\$ <u>0</u>	\$ <u>NIA</u>	\$ <u>0</u>	\$ <u>NIA</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
NIA	NIA	NIA	\$ NIA
			\$
			\$

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
NIA	NIA	NIA	\$ NIA
			\$
			\$

4. How much cash do you and your spouse have? \$ Q NIA  
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
NIA	NIA	\$ NIA	\$ NIA
		\$	\$
		\$	\$

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

☐ Home  
Value NIA

☐ Other real estate  
Value NIA

☐ Motor Vehicle #1  
Year, make & model NIA  
Value \_\_\_\_\_

☐ Motor Vehicle #2  
Year, make & model NIA  
Value \_\_\_\_\_

☐ Other assets  
Description NIA  
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

NIA

\$ NIA

\$ NIA

\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

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

Name  
NIA

Relationship  
NIA

Age  
NIA

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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)

\$ NIA

\$ NIA

Are real estate taxes included? ☐ Yes ☐ No

Is property insurance included? ☐ Yes ☐ No

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

\$ NIA

\$ NIA

Home maintenance (repairs and upkeep)

\$ NIA

\$ NIA

Food

\$ NIA

\$ NIA

Clothing

\$ NIA

\$ NIA

Laundry and dry-cleaning

\$ NIA

\$ NIA

Medical and dental expenses

\$ NIA

\$ NIA

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

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.

INcarcerated

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

Executed on: May 14, 2020

Joseph Blueport  
(Signature)

## UNITED STATES DISTRICT COURT

Eastern District of Louisiana

Joseph Blueford

Plaintiff

V.

APPLICATION TO PROCEED  
WITHOUT PREPAYMENT OF  
FEES AND AFFIDAVITTimothy Hooper

Defendant

CASE NUMBER:

I, Joseph Blueford, declare that I am the (check appropriate box)☒ petitioner/plaintiff/movant☐ other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? ☒ Yes ☐ No (If "No," go to Part 2)

If "Yes," state the place of your incarceration \_\_\_\_\_

Are you employed at the institution? No Do you receive any payment from the No

Have the institution certify the Statement of Account portion of this affidavit or attach a certified ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed? ☐ Yes ☒ No
- a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.
- b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. N/A

3. In the past 12 twelve months have you received any money from any of the following sources?

- |   |                              |  |
|---|------------------------------|--|
| a. Business, profession or other self-employment  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b. Rent payments, interest or dividends           | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments    | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances                          | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| f. Any other sources                              | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes", describe each source of money and state the amount received and what you expect you will continue to receive.

4. Do you have **any** cash or checking or savings accounts? ☐ Yes ☒ No

If "Yes," state the total amount. \_\_\_\_\_

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? ☐ Yes ☒ No

If "Yes," describe the property and state its value.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

Name Relationship Amount Contributed for Support

N/A

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

5-11-2020

Date

Joseph Blueford

Signature of Applicant

### STATEMENT OF ACCOUNT

(Certified Institutional Equivalent)

(To be completed by the institution of incarceration)

I hereby certify that this inmate, Joseph Blueford #393195, has a present inmate account balance of \$ 105.87 at the Elayn Hunt Correctional institution. I further certify that the average monthly deposits for the preceding six months is \$71.53

(The average monthly deposits are to be determined by adding the deposits made during a given month and dividing the total by the number of deposits made during that month. This is repeated for each of the six months. The average from each of the six months are to be added together and the total is divided by six).

I further certify that the average monthly balance for the prior six months is \$269.83

(The average monthly balance is to be determined by adding each day's balance for a given month and dividing that total by the number of days in that month. This is to be repeated for each of the six prior months. The balance from each of the six months are to be added together and the total is to be divided by six).

5-12-2020

Date Certified

Brenda Gooden

Authorized Officer of Institution



DEPARTMENT OF CORRECTIONS  
INMATE MASTER RECORD INFORMATION

DATE : 05/12/20  
TIME : 12:27:17

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DOC NUMBER...	393195	STATUS.....	ACTIVE	
LAST NAME	BLUEFORD	FIRST NAME	JOSEPH	M.I.: D
SENT LENGTH	LIFE			
RACE	BLACK	DOC SYSTEM ENTRY DATE	04/29/13	
SEX	MALE	DISCHARGE DATE	99/99/99	
LAST UPDATE	05/11/20	SAVINGS BONDS	N	

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LIVING QTRS	: FOX 6 TIER D	LIVING QTRS #	: 6083
	BEDS 79-104 COMPOUND 2		
WORK ASSIGNMENT	: YARD ORDERLIES	WORK ASSIGNMENT #	: 0T42
	GROUNDKEEPER 3	PAY RATE	: .160
INC.PAY XFER FLAG:		INC.PAY XFER DATE..	: 20191122

=====

DRAWING BALANCE	: \$ 0.49	->LAST 6 MONTH AVERAGE.....	\$ 9.72
SAVINGS BALANCE	: \$ 105.38	->LAST 6 MONTH AVERAGE.....	\$ <u>260.11</u>
RESERVE BALANCE	: \$ 0.00		<u>269.83</u>
TOTAL DEBT OWED	: \$ 0.00	LAST 6 MTH AVG EARNINGS..	\$ 71.53
ACCRUED SALES	: \$ 3.61	INSTITUTION LIMIT	: \$ 175.00
PERSONAL PROP. ACCRUED:	\$ 0.00	PERSONAL PROPERTY LIMIT:	\$ 250.00

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PRESS XMIT TO REQUEST ANOTHER INQUIRY : (ENTER X TO CANCEL FUNCTION)