

19-8894
No. _____

Supreme Court, U.S.

FILED

JUN 23 2020

OFFICE OF THE CLERK

IN THE
SUPREME COURT OF THE UNITED STATES

Michael Halliburton — PETITIONER
(Your Name)

VS.

Board of Professional Responsibility, et al. — 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):

Criminal Court of Tennessee, 30th Judicial District at Memphis, Div. 3,
Supreme Court of Tennessee at Nashville

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.

Michael Halliburton
(Signature)

ORIGINAL

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
Trousdale-Turner Correctional Center - Inmate Worker as Tutor	140 Macon Hwy Hartsville, TN 37074	2016 - to present	\$ Varies \$1.00 / hour \$ \$

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
NA	NA	NA	\$ \$ \$ NA

4. How much cash do you and your spouse have? \$ 48 94

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
NA	NA	\$ NA	\$ NA

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

Home
Value 0

Other real estate
Value 0

Motor Vehicle #1
Year, make & model 0
Value 0

Motor Vehicle #2
Year, make & model 0
Value 0

Other assets
Description 0
Value 0

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

Person owing you or your spouse money

NA

Amount owed to you

\$ NA

Amount owed to your spouse

\$ NA

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

Name

NA

Relationship

NA

Age

NA

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)

\$ Ø

\$ Ø

Are real estate taxes included? Yes No

Is property insurance included? Yes No NA

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

\$ Ø

\$ Ø

Home maintenance (repairs and upkeep)

\$ Ø

\$ Ø

Food

\$ \$75⁰⁰

\$ Ø

Clothing

\$ Ø

\$ Ø

Laundry and dry-cleaning

\$ Ø

\$ Ø

Medical and dental expenses

\$ Ø

\$ Ø

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>0</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>0</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>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>NA</u>	\$ <u>0</u>	\$ <u>0</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>NA</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony, maintenance, and support paid to others		
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>NA</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly expenses:	<u>\$ 75⁰⁰</u>	\$ <u>0</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? NA

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? NA

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.

NA

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

Executed on: June 9, 2020

Michael Hallinan
(Signature)