

No. 20-5188

**ORIGINAL**

IN THE  
SUPREME COURT OF THE UNITED STATES

Adelso Barnes — PETITIONER  
(Your Name)

VS.

Janet Dowling — RESPONDENT(S)

Supreme Court, U.S.  
FILED

JUL - 9 2020

OFFICE OF THE CLERK

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):  
\_\_\_\_\_  
\_\_\_\_\_

☒ 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.

Adelso Barnes  
(Signature)

**RECEIVED**

JUL 16 2020

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, Adelso Barnes, 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>NONE</u>	\$ <u>NONE</u>	\$ <u>NONE</u>	\$ <u>NONE</u>
Self-employment	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Income from real property (such as rental income)	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Interest and dividends	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Gifts	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Alimony	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Child Support	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Disability (such as social security, insurance payments)	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Unemployment payments	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Public-assistance (such as welfare)	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
Other (specify): <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>
<b>Total monthly income:</b>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </u>	\$ <u>  </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? N/A

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? N/A

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.

The state only ~~gives~~ gives me \$12.00 a month

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

Executed on: July 9, 2020

Adelxo Barnes

(Signature)

## REQUIRED CERTIFICATION

You must attach to this motion and affidavit a certified copy of your trust fund account statement (or institutional equivalent) for the six-month period immediately preceding the filing of this action. You must obtain the certified copy of your trust fund account statement (or institutional equivalent) from the appropriate official of each penal institution at which you are or were confined during the six-month period.

## STATEMENT OF INSTITUTIONAL ACCOUNTS

I hereby state that on 6<sup>th</sup> day of July, 2020, this prisoner had \$ 200.74 in his/her institutional account(s). I further state that the:

1. Average monthly deposits to the prisoner's accounts for the six-month period immediately preceding the filing of this action:

\$ 208.52 x 20% = \$ 41.70

2. Average monthly balance in the prisoner's accounts for six-month period immediately preceding the filing of this action:

\$ 208.17 x 20% = \$ 41.63

I FURTHER STATE THAT THE ABOVE REFERENCED AMOUNTS WERE CALCULATED PURSUANT TO THE PRISONERS INSTITUTIONAL ACCOUNTS(S), A COPY OF WHICH IS ATTACHED HERETO.

Dianna Collins  
Authorized Prison Official

Admin. Asst. I.  
Title

Offender#	Offender/Group Name	Institution	Unit	Cell/Bed
0641200	BARNES, ADELSON	DCCC	UNIT Q	AREA B UPPER- CELL 214- 10000

**Transaction List**

Transaction Date	Transaction Type	Source Document #	Receipt#/Check#	Sender Name	Amount	Account Balance
01/01/2020	BEGINNING BALANCE					\$180.48
01/31/2020	GANG PAY				\$14.45	\$194.93
01/31/2020	LEGAL COPAY	12/30/19DC			(\$8.78)	\$186.15
01/31/2020	LEGAL COPAY	DCC 1/16/20			(\$2.78)	\$183.37
02/19/2020	JPAY	0000000112217170		HUNTER, BIANCA	\$75.00	\$258.37
02/19/2020	LEGAL COPAY	DCC 1/16/20			(\$20.77)	\$237.60
02/24/2020	LEGAL COPAY	DCC 2/13/20			(\$0.65)	\$236.95
02/29/2020	GANG PAY				\$14.45	\$251.40
03/03/2020	DISBURSEMENT	US COURT APPEALS	13591468		(\$15.00)	\$236.40
03/03/2020	POSTAL COPAY				(\$13.80)	\$222.60
03/03/2020	LEGAL COPAY	3/2/20DC			(\$0.30)	\$222.30
03/04/2020	KEEFE	8217755R		Carter, Tamara	\$50.00	\$272.30
03/19/2020	SALES		48		(\$85.45)	\$186.85
03/19/2020	SALES		81		(\$0.41)	\$186.44
03/20/2020	LEGAL COPAY	3/16/20DC			(\$0.18)	\$186.26
03/21/2020	KEEFE	10270538R		Carter, Tamara	\$60.00	\$246.26
03/21/2020	LEGAL COPAY	3/16/20DC			(\$12.87)	\$233.39
03/25/2020	SALES		132		(\$47.04)	\$186.35
03/31/2020	GANG PAY				\$14.45	\$200.80
04/08/2020	KEEFE	10314213R		Carter, Tamara	\$60.00	\$260.80
04/09/2020	SALES		108		(\$48.76)	\$212.04
04/14/2020	KEEFE	10327596R		Carter, Tamara	\$50.00	\$262.04
04/15/2020	SALES		113		(\$37.88)	\$224.16
04/23/2020	SALES		70		(\$34.92)	\$189.24
04/27/2020	KEEFE	10360634R		Carter, Tamara	\$50.00	\$239.24
04/30/2020	GANG PAY				\$14.45	\$253.69
04/30/2020	SALES		113		(\$45.17)	\$208.52
05/07/2020	SALES		52		(\$15.98)	\$192.54
05/13/2020	LEGAL COPAY	DCC 5/1/20 PRINTING			(\$0.50)	\$192.04
05/31/2020	GANG PAY				\$14.45	\$206.49
05/31/2020	LEGAL COPAY	DCC 5/14/20			(\$2.30)	\$204.19
06/03/2020	DISBURSEMENT	US COURT OF APPEALS	13598905		(\$8.50)	\$195.69
06/03/2020	DISBURSEMENT FEE				(\$0.55)	\$195.14
06/10/2020	MEDICAL COPAY	02482484			(\$0.21)	\$194.93
06/30/2020	GANG PAY				\$14.45	\$209.38
06/30/2020	MEDICAL COPAY	02482484			(\$3.79)	\$205.59
06/30/2020	PRESCRIPTION COPAY	02482484			(\$4.00)	\$201.59
06/30/2020	LEGAL COPAY	6/19/20DC			(\$0.85)	\$200.74

**Summary Balances**

Available Balance	Savings Balance	Debt Encumbrance	Other Encumbrance	Outstanding Instruments	Administrative Holds	Account Balance
\$2.92	\$197.82	\$0.00	\$0.00	\$0.00	\$0.00	\$200.74