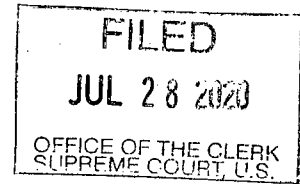


20-5354  
No. \_\_\_\_\_

ORIGINAL



IN THE  
SUPREME COURT OF THE UNITED STATES

JOHNNIE LEE JORDAN JR. -- PETITIONER

VS.

SECRETARY, FLORIDA DEPARTMENT  
OF CORRECTIONS, -- 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): United States District Court, Middle District, Tampa Division, Florida

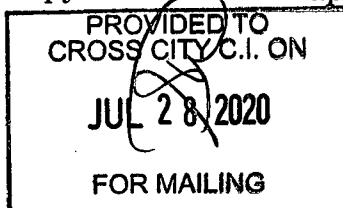
☐ Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

☒ 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:

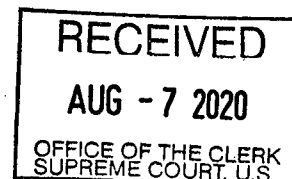
☐ The appointment was made under the following provision of law: \_\_\_\_\_, or

☐ a copy of the order of appointment is appended.



lf

  
(Signature)



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

I, Johnnie Jordan, 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.

- 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	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Self-employment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Income from real property (such as rental income)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Interests and dividends	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Gifts	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Alimony	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Child support	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Retirement (such as Social Security, pensions, annuities, insurance)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Disability (such as Social Security, insurance payments)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Unemployment payments	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Public assistance (such as welfare)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Other (specify): <u>NA</u>	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
<b>Total monthly income:</b>	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

- 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
NA	NA	NA
NA	NA	NA
NA	NA	NA

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.)

NA	NA	NA	NA
NA	NA	NA	NA

4. How much cash do you and your spouse have? \$ None

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		\$ 0	\$ 0
NA		\$ 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)	Other Real Estate (Value)	Motor Vehicle #1 (Value)
NA	NA	Make & Year: NA
NA	NA	Model: NA
NA	NA	Registration #: NA
Other Assets (Value)	Other Assets (Value)	Motor Vehicle #2 (Value)
NA	NA	Make & Year: NA
NA	NA	Model: NA
NA	NA	Registration #: NA

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

Person owing you or your spouse money Amount owed to you Amount owed to your spouse

NA	NA	NA
NA	NA	NA
NA	NA	NA

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

Name [or, if under 18, initials only]	Relationship	Age
NA	NA	NA
NA	NA	NA
NA	NA	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, semiannually, or annually to show the monthly rate.

	You	Your Spouse
For home-mortgage payment (include lot rented for mobile home)	\$ 0.00	\$ 0.00
Are real-estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$ 0.00	\$ 0.00
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$ 0.00	\$ 0.00
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 0.00	\$ 0.00
Home maintenance (repairs and upkeep)	\$ 0.00	\$ 0.00
Food	\$ 0.00	\$ 0.00
Clothing	\$ 0.00	\$ 0.00
Laundry and dry-cleaning	\$ 0.00	\$ 0.00
Medical and dental expenses	\$ 0.00	\$ 0.00
Transportation (not including motor vehicle payments)	\$ 0.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$ 0.00
Insurance (not deducted from wages or included in mortgage payments)	\$ 0.00	\$ 0.00
Homeowner's or renter's	\$ 0.00	\$ 0.00
Life	\$ 0.00	\$ 0.00
Health	\$ 0.00	\$ 0.00
Motor Vehicle	\$ 0.00	\$ 0.00
Other: <u>NA</u>	\$ 0.00	\$ 0.00
Taxes (not deducted from wages or included in mortgage payments) (specify): <u>NA</u>	\$ 0.00	\$ 0.00
Installment payments	\$ 0.00	\$ 0.00
Motor Vehicle	\$ 0.00	\$ 0.00
Credit card (name): <u>NA</u>	\$ 0.00	\$ 0.00
Department store (name): <u>NA</u>	\$ 0.00	\$ 0.00
Other: <u>NA</u>	\$ 0.00	\$ 0.00
Alimony, maintenance, and support paid to others	\$ 0.00	\$ 0.00
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Other (specify): <u>NA</u>	\$ 0.00	\$ 0.00
<b>Total monthly expenses</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>

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

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.* I am incarcerated with no paying job

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

Executed on: July 28, 2020

  
(Signature)