

ORIGINAL

No. 20-6143

FILED

SEP 17 2020

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SUPREME COURT, U.S.

I N T H E
SUPREME COURT OF THE UNITED STATES

M R. S A U L M A N G U A L - C O R C H A D O
P E T I T I O N E R

v.

T H E U N I T E D S T A T E S

R E S P O N D E N T(S)

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

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

- Petitioner has previously been granted leave to proceed in forma pauperis the following courts:
* The U.S. District Court for Puerto Rico
* The U.S Appeals Court for the First Circuit Court
* The U.S. Supreme Court
- Petitioner's affidavit or declaration in support of this motion is attached hereto.
- Petitioner was made appointment under the following provision of law Penalties of Pejury 28 U.S.C § 1746.

Saul Magal
MR. SAUL MANGUAL-CORCHADO
11072-069 Unit D-1
FCC - USP TERRE HAUTE
P.O. BOX - 0033
TERRE HAUTE, INDIANA 47808

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

I, MR. SAUL MANGUAL-CORCHADO, 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 I and my spouse the estimated 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 to show the monthly rate. My gross amount, that is the amount before any deductions for taxes or otherwise.

Income source	Average monthly amount during the past 12 mons.	Amount expected next month.		
	YOU	SPOUSE	YOU	SPOUSE
Employment	\$ <u>144.0</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Self employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Income from real property (such as rental property)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Gifts	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Child Support	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Retirement (such as social security, pen- sion, annuities, in- surance)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Disability (such as social security, in- surance payments)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Unemployment pay- ments	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Public Assistance	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
TOTAL MONTHLY INCOME	\$ <u>120.00</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

- 2 List your employment history for the past two years, most recent first (Gross monthly payment is before taxes)

EMPLOYER	ADDRESS	DATE of EMPLOYMENT	GROSS MONTHLY
UNICOR	USP TERRE HAUTE	2014 - CURRENT	\$ 120.00
N/A	N/A	N/A	\$ N/A
N/A	N/A	N/A	\$ N/A

3. List your spouse's employment history for the past two years, most recent first (Gross monthly payment is before taxes)

EMPLOYER	ADDRESS	DATE of EMPLOYMENT	GROSS MONTHLY
N/A	N/A	N/A	\$ N/A
N/A	N/A	N/A	\$ N/A
N/A	N/A	N/A	\$ N/A

4. How much cash do you and your spouse have on hand \$ NONE
State any money you or your spouse have in the bank or any other financial institution.

Type of account (specify checking, savings, credit union)

N/A	Amount You Have	N/A	Amount spouse has
N/A	\$ N/A	N/A	\$ N/A
N/A	\$ N/A	N/A	\$ N/A

5. List the assets, and their values, which you own or your spouse owns

() HOME VALUE	<u>N/A</u>	() OTHER REAL ESTATE VALUE	<u>N/A</u>
() MOTOR VEHICLE VALUE MAKE & MODEL & YEAR	<u>N/A</u>	() MOTOR VEHICLE VALUE MAKE & MODEL & YEAR	<u>N/A</u>
() OTHER ASSETS DESCRIPTION & VALUE	<u>NONE</u>		

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

PERSONS OWING YOU OR YOUR SPOUSE MONEY	AMOUNT OWED YOU	AMOUNT OWED YOUR SPOUSE
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

7. State the persons who rely on you or your spouse for support. (use initials instead of their names Minors included)

NAMES	RELATIONSHIP	AGE
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

8. Estimate the average monthly expenses of you and your family. Show separate 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)	\$ <u>N/A</u>	\$ <u>N/A</u>
Are real estate tax included	<input type="checkbox"/> yes	<input type="checkbox"/> no
Is property insurance added	<input type="checkbox"/> yes	<input type="checkbox"/> no
Utilities (electricity, heating, fuel, water, sewer and telephone)	\$ <u>N/A</u>	\$ <u>N/A</u>
Home maintenance	\$ <u>N/A</u>	\$ <u>N/A</u>
Food	\$ <u>75.00</u>	\$ <u>N/A</u>
Clothing	\$ <u>N/A</u>	\$ <u>N/A</u>
Laundry & dry cleaning	\$ <u>N/A</u>	\$ <u>N/A</u>
Medical & dental expenses	\$ <u>N/A</u>	\$ <u>N/A</u>

	YOU	YOUR SPOUSE
Transportation (not including car payments)	\$ <u>N/A</u>	\$ <u>N/A</u>
Recreation, entertainment, books magazines, newspapers etc.	\$ <u>25.00</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in home fees)	\$ <u>N/A</u>	\$ <u>N/A</u>
Homeowner's or renters	\$ <u>N/A</u>	\$ <u>N/A</u>
Life	\$ <u>N/A</u>	\$ <u>N/A</u>
Health	\$ <u>N/A</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Taxes (not deducted from wages)	\$ <u>N/A</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Credit Cards	\$ <u>N/A</u>	\$ <u>N/A</u>
Department Store	\$ <u>N/A</u>	\$ <u>N/A</u>
Others:	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony, maintenance and support	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm	\$ <u>N/A</u>	\$ <u>N/A</u>
Other specify: <u>Food</u>	\$ <u>75.00</u>	\$ <u>N/A</u>
Total Monthly Expenses	\$ <u>100.00</u>	\$ <u>N/A</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? *Do to COVID-19 I HAVE NO INCOMES*
() Yes () No *Right Now...*

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 & phone 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 name of the person;s address, & phone

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

Due to the COVID-19 Pandemic Crisis, work and all other activities have been modified, hindered and/or halted therefore --- having any additional funds is not at all available to me at this time, through family, friends or otherwise.

I declare under the Penalties of Perjury, that the foregoing given is true, correct and accurate under 28 U.S.C. § 1746

Executed on this 14th day of September of 2020

s/ MR. SAUL MANGUAL-CORCHADO
MR. SAUL MANGUAL-CORCHADO