

No.

October Term, 2020

In the
Supreme Court of the United States

Michael Adkisson,
Petitioner,
v.

Nevada,
Respondent.

On Petition for Writ of Certiorari from the
Nevada Supreme Court

Motion for Leave to Proceed *In Forma Pauperis*

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Attorneys for Petitioner
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Pursuant to Supreme Court Rule 39.1, Petitioner Michael Adkisson requests leave to file the attached Petition for Writ of Certiorari without prepayment of costs and to proceed *in forma pauperis*. Adkisson has been granted leave to do so in state and federal court. In state court, counsel was appointed to represent Adkisson during his state post-conviction proceedings. In his federal habeas corpus proceedings, the United States District Court granted Adkisson's motion for appointment of counsel under the Criminal Justice Act and appointed the Federal Public Defender to represent him. *See Adkisson v. Neven, et. al.* No. 2:14-cv-01934-APG-DJA, ECF No. 12 (Dist. Nev. June 1, 2015). A financial declaration is attached. *See* Sup. Ct. Rule 39.1.

Dated: February 25, 2021.

Respectfully submitted,

/s/ Jonathan M. Kirshbaum
JONATHAN M. KIRSHBAUM
Assistant Federal Public Defender

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

Michael Adkisson

I, Michael Adkisson, 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>1289⁰⁰</u>	\$ <u>0</u>	\$ <u>1512⁰⁰</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>934⁰⁰</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>120⁰⁰</u>	\$ <u>0</u>	\$ <u>120⁰⁰</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>0</u>	\$ <u>1343⁰⁰</u>	\$ <u>0</u>	\$ <u>1632⁰⁰</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
N.A. IMPRISONED			\$
			\$
			\$

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
D.I.D.C. INC.	20015 JONES BLVD STEK LAS VEGAS NEVADA 89146	2-2006 to CURRENT	\$ 1512.00
			\$
			\$

4. How much cash do you and your spouse have? \$ ~~800~~ \$400.51

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
SAVINGS	\$ 0	\$ 817.51
CHECKING	\$ 0	\$ 383.00
	\$ 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 N/A

Other real estate
Value N/A

Motor Vehicle #1
Year, make & model 2012 FORD F150
Value \$8,500.00

Motor Vehicle #2
Year, make & model 2018 CHEV. CRUZ
Value \$4,199.00 ~~\$7,500.00~~

Other assets
Description _____
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
<u>NONE</u>	\$ <u>NONE</u>	\$ <u>NONE</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

Name	Relationship	Age
<u>F. M. A.</u>	<u>DAUGHTER</u>	<u>16</u>
<u>Josephine LEWIS</u>	<u>Mother to my spouse</u>	<u>71</u>
_____	_____	_____

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)	\$ <u>0</u> <u>N/A</u>	\$ <u>431⁰⁰</u>
Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>0</u>	\$ <u>440⁰⁰</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ _____
Food	\$ <u>0</u>	\$ <u>500⁰⁰</u>
Clothing	\$ <u>0</u>	\$ <u>100⁰⁰</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>50⁰⁰</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>200⁰⁰</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N.A.</u>	\$ <u>100⁰⁰</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>50⁰⁰</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>15⁰⁰</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>150⁰⁰</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ <u>0</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>340⁰⁰</u>
Credit card(s)	\$ <u>0</u>	\$ <u>50⁰⁰</u>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N.A.</u>	\$ <u>0</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>0</u>
Total monthly expenses:	\$ <u>0</u>	\$ <u>2481⁰⁰</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.

- 1.) 17 years in prison has contributed to my families POVERTY
- 2.) My mother-in-Law suffered a massive stroke, my wife is HER SOLE CARE PROVIDER - THIS HAS LIMITED OTHER OPPORTUNITIES
- 3.) My wife is the Sole PARENTAL Authority in the home and faced with the CARE AND Needs of Two Children and a PARALYZED PARENT WITH ME UNABLE TO CONTRIBUTE HAS LIMITED THE OPPORTUNITIES MY FAMILY HAS HAD

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

Executed on: FEBRUARY 2nd, 2021


(Signature)