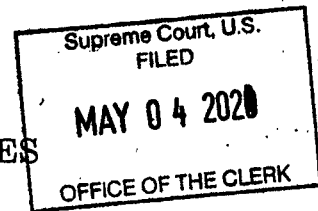


20-8123
No. _____

IN THE
SUPREME COURT OF THE UNITED STATES



VERLAN PEREZ, JR., — PETITIONER
(Your Name)

VS.

UNITED STATES OF AMERICA, — 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*.

☒ Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

the United States District Court for the Northern District of
Texas and the U.S. Court of Appeals for the Fifth Circuit.

☐ 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.

Verlan Perez JR

(Signature)

Verlan Perez, Jr.

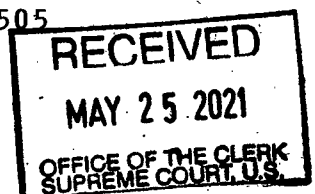
#56328-177

FCI-Texarkana

P.O. Box 7000

Texarkana, TX 75505

Ph: (903) 838-4587



ANDREW COBBITT
OFFICE OF THE CLERK
MVA 52 SOSI
RECEIVED

OFFICE OF THE CLERK
MVA C.F. SOSI
FILED
ANDREW COBBITT

OFFICE OF THE CLERK
MVA 52 SOSI

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

I, Verlan Perez, Jr., 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	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Self-employment	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Income from real property (such as rental income)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Interest and dividends	\$ 0.00	\$	\$ 0.00	\$
Gifts	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Alimony	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Child Support	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.00	\$	\$ 0.00	\$
Disability (such as social security, insurance payments)	\$ 0.00	\$	\$ 0.00	\$
Unemployment payments	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Public-assistance (such as welfare)	\$ 0.00	\$ N/A	\$ 0.00	\$ N/A
Other (specify): <u>N/A</u>	\$ 0.00	\$ N/A	\$ 0.00	\$
Total monthly income:	\$ 0.00	\$ N/A	\$ 0.00	\$

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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	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00

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
N/A	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00

4. How much cash do you and your spouse have? \$ 0.00
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
N/A	N/A	\$ N/A	\$ N/A
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. Do not list clothing and ordinary household furnishings.

☐ Home
Value N/A

☐ Other real estate
Value N/A

☐ Motor Vehicle #1
Year, make & model N/A
Value N/A

☐ Motor Vehicle #2
Year, make & model N/A
Value N/A

☐ Other assets
Description N/A
Value N/A

1900-1910

1910-1920

1920-1930

1930-1940

1940-1950

1950-1960

1960-1970

1970-1980

1980-1990

1990-2000

2000-2010

2010-2020

2020-2030

2030-2040

2040-2050

2050-2060

2060-2070

2070-2080

2080-2090

2090-2100

2100-2110

2110-2120

2120-2130

2130-2140

2140-2150

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

N/A

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

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

Name

Relationship

Age

N/A

N/A

N/A

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)

\$ 0.00

\$ N/A

Are real estate taxes included? ☐ Yes ☒ No

Is property insurance included? ☐ Yes ☒ No

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

\$ 0.00

\$ N/A

Home maintenance (repairs and upkeep)

\$ 0.00

\$ N/A

Food

\$ 0.00

\$ N/A

Clothing

\$ 0.00

\$ N/A

Laundry and dry-cleaning

\$ 0.00

\$ N/A

Medical and dental expenses

\$ 0.00

\$ N/A

1. The first part of the report

2. The second part of the report

3. The third part of the report

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11. The eleventh part of the report

12. The twelfth part of the report

13. The thirteenth part of the report

14. The fourteenth part of the report

15. The fifteenth part of the report

16. The sixteenth part of the report

17. The seventeenth part of the report

18. The eighteenth part of the report

19. The nineteenth part of the report

20. The twentieth part of the report

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0.00	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0.00	\$
Life	\$ 0.00	\$
Health	\$ 0.00	\$ N/A
Motor Vehicle	\$ 0.00	\$
Other: N/A	\$ 0.00	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): N/A	\$ 0.00	\$ N/A
Installment payments		
Motor Vehicle	\$ 0.00	\$
Credit card(s)	\$ 0.00	\$
Department store(s)	\$ 0.00	\$ N/A
Other: N/A	\$ 0.00	\$
Alimony, maintenance, and support paid to others	\$ 0.00	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$
Other (specify): N/A	\$ 0.00	\$ N/A
Total monthly expenses:	\$ 0.00	\$

THESE DOCUMENTS ARE THE PROPERTY OF THE
FEDERAL BUREAU OF INVESTIGATION
AND ARE LOANED TO YOUR AGENCY FOR OFFICIAL USE ONLY
AND ARE NOT TO BE DISTRIBUTED OUTSIDE YOUR AGENCY

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 10-10-00 BY 60322 UCBAW

EXCEPT WHERE SHOWN OTHERWISE, THIS DOCUMENT IS IN THE PUBLIC DOMAIN AND IS NOT TO BE CLASSIFIED

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DATE 10-10-00 BY 60322 UCBAW

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:

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:

N/A

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

I am currently incarcerated and unemployed.

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

Executed on: April 23, 2021

Verlan Perez

(Signature)

84

U. S. DEPARTMENT OF AGRICULTURE

WASHINGTON, D. C.

OFFICE OF THE SECRETARY

WASHINGTON, D. C. 20250

1954

MEMORANDUM

TO: THE SECRETARY

FROM: [illegible]

SUBJECT: [illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]