

20-8124

No. \_\_\_\_\_

IN THE  
SUPREME COURT OF THE UNITED STATES



Lance Owens — PETITIONER  
(Your Name)

VS.

Dexter Payne, Director A.D.C. — 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):  
\_\_\_\_\_  
\_\_\_\_\_

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.

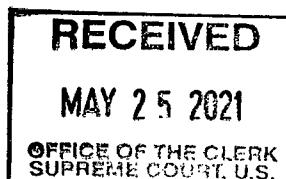
Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

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

a copy of the order of appointment is appended.

Lance Mitchell Owens

(Signature)



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

I, Lance Owens, 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 therefore 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 source 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.**

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
<b>Employment</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Self-employment</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Income from real property</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Interest and dividends</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Gifts</b>	\$ <u>55.00</u>	\$ <u>N/A</u>	\$ <u>50.00</u>	\$ <u>N/A</u>
<b>Alimony</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Child Support</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Retirement</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Disability</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Unemployment payments</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Public-assistance</b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Other (specify) <u>None</u></b>	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Total monthly income:</b>	<b>\$ <u>55.00</u></b>	<b>\$ <u>N/A</u></b>	<b>\$ <u>50.00</u></b>	<b>\$ <u>N/A</u></b>

**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
None Incarcerated past 20 yrs	None	None	\$ Ø
None	None	None	\$ Ø
None	None	None	\$ Ø

**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	\$ Ø
N/A	N/A	N/A	\$ Ø
N/A	N/A	N/A	\$ Ø

**4. How much cash do you and your spouse have? \$ Ø**

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

Financial Institution	Balance
None	\$ Ø
None	\$ Ø

**5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.**

Home Value	Ø	Other real estate	Ø
Motor vehicle	Ø	Motor vehicle	Ø
Other assets	None		

**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
None	\$ 0	\$ 0
None	\$ 0	\$ 0
None	\$ 0	\$ 0

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

Name	Relationship	Age
None	N/A	N/A
None	N/A	N/A
None	N/A	N/A

**8. Estimate the average monthly expenses for 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	\$ 0		\$ N/A
Are real estate taxes included?	Yes	No	
Is property insurance included?	Yes	No	
Utilities	\$ 0		\$ N/A
Home maintenance	\$ 0		\$ N/A
Food	\$ 25.00		\$ N/A
Clothing	\$ 0		\$ N/A
Laundry and dry-cleaning	\$ 0		\$ N/A
Medical and dental expenses	\$ 6.00		\$ N/A
Transportation	\$ 0		\$ N/A
Recreation, entertainment, newspapers, etc.	\$ 0		\$ N/A

You

## Your spouse

**Insurance (not deducted from wages or included in mortgage payments)**

<b>Homeowner's or renter's</b>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Life</b>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Health</b>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Motor Vehicle</b>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Other</b> None	\$ <u>Ø</u>	\$ <u>N/A</u>

**Taxes (not deducted from wages or included in mortgage payments)**

(specify): None      \$ 0      \$ N/A

## Installment payments

<b>Motor Vehicle</b>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Credit card(s)</b>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Department store(s)</b>	\$ <u>Ø</u>	\$ <u>N/A</u>
<b>Other:</b> <u>None</u>	\$ <u>Ø</u>	\$ <u>N/A</u>

**Alimony, maintenance, and support paid to others** \$ 0 **\$ N/A**

**Regular expenses for operation of business, profession,  
or farm (attach detailed statement)** \$ 0 \$ 0

Other (specify): None \$ 0 \$ N/A

Total monthly expenses: \$31.00 \$ N/A

**9. Do you expect any major change 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?      None**

**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? None

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 will be paying .05<sup>¢</sup> per page for copies of this Petition.*

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

Executed on: April 11, 2021

Lance Mitchell Owers  
(Signature)