

No. USCA5 # 19-30660

IN THE  
SUPREME COURT OF THE UNITED STATES

CYRUS CASBY — PETITIONER  
(Your Name)

VS.

UNITED STATES — 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):

U.S. DISTRICT COURT (11-130)

U.S. APPEALS COURT (14-31381), (14-30010) : U.S. SUPREME COURT (16-9330)

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.

*M. G. C.*  
(Signature)

RECEIVED

APR - 8 2021

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, MR. CYRUS CASBY, 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.

<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>
Employment	\$ <u>INMATE INQUIRY</u>	\$ _____	\$ <u>0</u>	\$ _____
Self-employment	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Income from real property (such as rental income)	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Interest and dividends	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Gifts	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Alimony	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Child Support	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Disability (such as social security, insurance payments)	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Unemployment payments	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Public-assistance (such as welfare)	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
Other (specify): _____	\$ " "	\$ _____	\$ <u>0</u>	\$ _____
<b>Total monthly income:</b>	\$ <u>INMATE INQUIRY</u> ATTACHED	\$ _____	\$ <u>0</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
_____	_____	_____	\$ 0
_____	_____	_____	\$ 0
_____	_____	_____	\$ 0

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
_____	_____	_____	\$ 0
_____	_____	_____	\$ 0
_____	_____	_____	\$ 0

4. How much cash do you and your spouse have? \$ "INMATE INQUIRY"  
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
_____	\$ " "	\$ _____
_____	\$ " "	\$ _____
_____	\$ " "	\$ _____

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

Home  
Value 0

Other real estate  
Value 0

Motor Vehicle #1  
Year, make & model 0  
Value 0

Motor Vehicle #2  
Year, make & model 0  
Value 0

Other assets  
Description INTELLECTUAL PROPERTY  
Value 0 (CURRENTLY)

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**

○  
○  
○

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

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**

○  
○  
○

\_\_\_\_\_

\_\_\_\_\_

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)

\$ ○ \$ \_\_\_\_\_

Are real estate taxes included?  Yes  No

Is property insurance included?  Yes  No

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

\$ ○ \$ \_\_\_\_\_

Home maintenance (repairs and upkeep)

\$ ○ \$ \_\_\_\_\_

Food

\$ ○ \$ \_\_\_\_\_

Clothing

\$ ○ \$ \_\_\_\_\_

Laundry and dry-cleaning

\$ ○ \$ \_\_\_\_\_

Medical and dental expenses

\$ ○ \$ \_\_\_\_\_

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

BUT I HOPE TO  
HIRE AN ATTORNEY MAYBE

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.

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

Executed on: MARCH 31, 20 21

M. G. C.  
(Signature)

## Inmate Inquiry



**Inmate Reg #:** 18881078      **Current Institution:** Pollock USP  
**Inmate Name:** CASBY, CYRUS      **Housing Unit:** POL-A-D  
**Report Date:** 03/31/2021      **Living Quarters:** A04-454L  
**Report Time:** 9:43:17 AM

[General Information](#) | [Account Balances](#) | [Commissary History](#) | [Commissary Restrictions](#) | [Comments](#)  
**General Information**

Administrative Hold Indicator: No

No Power of Attorney: No

Never Waive NSF Fee: No

Max Allowed Deduction %: 100

PIN: 5480

PAC #: 193752170

Revalidation Date: 4th

FRP Participation Status: Participating

Arrived From: YAZ

Transferred To:

Account Creation Date: 6/23/2011

Local Account Activation Date: 1/18/2019 3:12:50 AM



Sort Codes:

Last Account Update: 3/30/2021 3:17:01 PM

Account Status: Active

Phone Balance: \$2.46

### Pre-Release Plan Information

Target Pre-Release Account Balance: \$2,000.00

Pre-Release Deduction %: 5%

Income Categories to Deduct From:  Payroll  Outside Source Funds

Pre-Release Deduction %: 5%

### FRP Plan Information

FRP Plan Type	Expected Amount	Expected Rate
Quarterly	\$25.00	0%

### Account Balances

Account Balance: \$2,900.71  
 Pre-Release Balance: \$2,000.00  
 Debt Encumbrance: \$0.00  
 SPO Encumbrance: \$0.00  
 Other Encumbrances: \$0.00

Outstanding Negotiable Instruments: \$0.00  
 Administrative Hold Balance: \$0.00  
 Available Balance: \$900.71  
 National 6 Months Deposits: \$1,360.00  
 National 6 Months Withdrawals: \$714.40  
 Available Funds to be considered for IFRP Payments: \$860.00  
 National 6 Months Avg Daily Balance: \$2,854.75  
 Local Max. Balance - Prev. 30 Days: \$3,030.01  
 Average Balance - Prev. 30 Days: \$2,989.17

## Commissary History

### Purchases

Validation Period Purchases: \$119.30  
 YTD Purchases: \$594.80  
 Last Sales Date: 3/30/2021 3:17:01 PM

### SPO Information

SPO's this Month: 0  
 SPO \$ this Quarter: \$0.00

### Spending Limit Info

Spending Limit Override: No  
 Weekly Revalidation: No  
 Bi-Weekly Revalidation: No  
 Spending Limit: \$360.00  
 Expended Spending Limit: \$106.30  
 Remaining Spending Limit: \$253.70

## Commissary Restrictions

### Spending Limit Restrictions

Restricted Spending Limit: \$0.00

Restricted Expended Amount: \$0.00

Restricted Remaining Spending Limit: \$0.00

Restriction Start Date: N/A

Restriction End Date: N/A

### Item Restrictions

List Name	List Type	Start Date	End Date	Active
-----------	-----------	------------	----------	--------