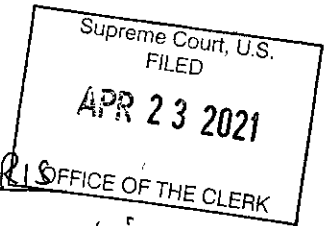


No. ~~21-5113~~

ORIGINAL

In the Supreme Court of the United States  
Michael Almeudarez §  
v. Bobby Lumpkin § ON PETITION FOR WRIT OF  
§ CERTIORARI



MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

My name is Michael Almeudarez and I am asking this court to waive the filing fee because I am indigent. Attached is a copy of my affidavit and 6-month print out.

Prayer

Please allow me to proceed without being required to pay the court's costs.

Signed this 7th day of April, 2021.

Michael Almeudarez

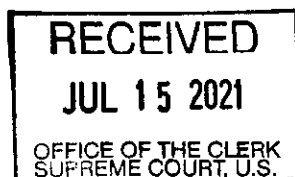
Michael Almeudarez

Certificate of Service

I certify that I placed a copy of the foregoing in the prison mailbox, using the indigent program, addressed to: Jessica Manajlovich, Asst. Atty. General, P.O. Box 12548, Austin, TX, 78711, on this 7th day of April, 2021.

Michael Almeudarez

Michael Almeudarez  
#1601384  
Eastham Unit  
2665 Prison Rd, #1  
Lovelady, TX 75851



IN THE UNITED STATES DISTRICT COURT  
FOR THE \_\_\_\_\_ DISTRICT OF TEXAS  
\_\_\_\_\_  
DIVISION  
UNITED STATES SUPREME COURT

Michael Almeudarez #1601384

Plaintiff's name and ID Number

Eastham Unit

Place of Confinement

CASE NO. \_\_\_\_\_  
(Clerk will assign the number)

V.

Bobby Lumpkin, Director - TDCJ-1A  
P.O. Box 99  
Huntsville, TX 77342

APPLICATION TO PROCEED  
IN FORMA PAUPERIS

Defendant's name and address

I, Michael Almeudarez, declare, depose, and say I am the Plaintiff in the above entitled case. In support of my motion to proceed without being required to prepay fees, costs, or give security therefor, I state because of my poverty, I am unable to pay in advance the filing fee for said proceedings or to give security for the filing fee. I believe I am entitled to relief.

I, further declare the responses which I have made to the questions and instructions below are true.

1. Have you received, within the last 12 months, any money from any of the following sources?

- |  |   |  |
|--|---|--|
| a. Business, profession or from self-employment?   | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| b. Rent payments, interest or dividends?           | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| c. Pensions, annuities or life insurance payments? | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| d. Gifts or inheritances?                          | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| e. Family or friends?                              | Yes <input type="checkbox"/>            | No <input checked="" type="checkbox"/> |
| f. Any other sources?                              | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/>            |

If you answered YES to any of the questions above, describe each source of money and state the amount received from each during the past 12 months.

I received the Economic Impact Stimulus checks

2. Do you own cash, or do you have money in a checking or savings account, including any funds in prison accounts?

Yes ☒ No ☐

If you answered YES to any of the questions above, state the total value of the items owned.

I have received the stimulus money, direct-deposited  
into a friend's account for me. Total amount = \$2,000

3. Do you own real estate, stocks, bonds, note, automobiles, or other valuable property, excluding ordinary household furnishings and clothing?

Yes ☐

No ☒

If you answered YES, describe the property and state its approximate value.

\_\_\_\_\_  
\_\_\_\_\_

I understand a false statement in answer to any question in this affidavit will subject me to penalties for perjury. I declare (certify, verify, or state) under penalty of perjury that the foregoing is true and correct (28 U.S.C. §1746).

Signed this the 7<sup>th</sup> day of April, 2021.

Michael Alexander 1601384  
Signature of Plaintiff ID Number

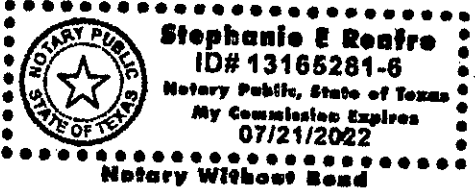
**YOU MUST ATTACH A CURRENT SIX (6) MONTH HISTORY OF YOUR INMATE TRUST ACCOUNT. YOU CAN ACQUIRE THE APPROPRIATE INMATE ACCOUNT CERTIFICATE FROM THE LAW LIBRARY AT YOUR PRISON UNIT.**

(A) tdc01aho - PASSPORT

Wednesday, April 07, 2021, 12:55:18 PM

CSINIB02/CINIB02 TEXAS DEPARTMENT OF CRIMINAL JUSTICE 04/07/21  
LAHO/RS00164 IN-FORMA-PAUPERIS DATA 12:55:11  
TDCJ#: 01601384 SID#: 04463851 LOCATION: EASTHAM INDIGENT DTE: 08/23/17  
NAME: ALMENDAREZ, MICHAEL ANTHONY BEGINNING PERIOD: 10/01/20  
PREVIOUS TDCJ NUMBERS: 00593841 00655688  
CURRENT BAL: 0.00 TOT HOLD AMT: 0.00 3MTH TOT DEP: 4.60  
6MTH DEP: 4.60 6MTH AVG BAL: 0.00 6MTH AVG DEP: 0.77  
MONTH HIGHEST BALANCE TOTAL DEPOSITS MONTH HIGHEST BALANCE TOTAL DEPOSITS  
03/21 4.60 4.60 12/20 0.00 0.00  
02/21 0.00 0.00 11/20 0.00 0.00  
01/21 0.00 0.00 10/20 0.00 0.00

STATE OF TEXAS COUNTY OF *Houston*  
ON THIS THE *7<sup>th</sup>* DAY OF *April 2021*, I CERTIFY THAT THIS DOCUMENT IS A TRUE,  
COMPLETE, AND UNALTERED COPY MADE BY ME OF INFORMATION CONTAINED IN THE  
COMPUTER DATABASE REGARDING THE OFFENDER'S ACCOUNT. NP SIG:  
PF1-HELP PF3-END ENTER NEXT TDCJ NUMBER: \_\_\_\_\_ OR SID NUMBER: \_\_\_\_\_

*Stephanie E. Renfro*  
  
Notary Without Bond

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

I, Michael Almedarez, 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>0</u>	\$ <u>0</u>	\$ <u>0</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>0</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<b>Total monthly income:</b>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <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
N/A			\$
N/A			\$
N/A			\$

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			\$

4. How much cash do you and your spouse have? \$ 2,000 (in a cash App)  
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
		\$	\$
		\$	\$
		\$	\$

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

<input type="checkbox"/> Home Value <u>N/A</u>	<input type="checkbox"/> Other real estate Value <u>N/A</u>
<input type="checkbox"/> Motor Vehicle #1 Year, make & model <u>N/A</u> Value _____	<input type="checkbox"/> Motor Vehicle #2 Year, make & model <u>N/A</u> Value _____

☐ Other assets  
Description N/A - I do own \$2,000 from the stimulus checks given pursuant to the CARES ACT. It is in a cash app. waiting to be paid to a halfway house, so that I'll have a place paid for, for my parole release.  
Value \$2,000

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  
N/A  
N/A

\$ 0  
\$ 0  
\$ 0

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

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

Name	Relationship	Age
<u>N/A</u>		
<u>N/A</u>		
<u>N/A</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)

\$ 0

\$ N/A

Are real estate taxes included? ☒ Yes ☐ No

Is property insurance included? ☒ Yes ☐ No

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

\$ 5.00

\$ N/A

Home maintenance (repairs and upkeep)

\$ 0

\$ N/A

Food

\$ 95.00

\$ N/A

Clothing

\$ 0

\$ N/A

Laundry and dry-cleaning

\$ 0

\$ N/A

Medical and dental expenses

\$ 0

\$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>10.00</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <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 or included in mortgage payments)		
(specify): _____	\$ <u>N/A</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>Federal Court fees = 20% of</u> <u>\$234.05</u>	\$ <u>46.81</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>INDIGENT SUPPLY DEBT = 129.73</u> <u>Medical co-pay owed = \$100.00</u>	\$ <u>229.73</u>	\$ <u>N/A</u>
<b>Total monthly expenses:</b>	\$ <u>276.54</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?

☐ 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.

*I received stimulus checks from the Economic Impact Payment CARES Act. In order for me to be released on parole I must go to a halfway house, which charges a deposit and monthly rent. I have to pre-pay in order to receive the privilege of paroling to the halfway house. I am waiting on our agreement and then any stimulus money will go to the halfway house.*

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

Executed on: June 30<sup>th</sup>, 2021

Michael Amador  
(Signature)