

IN THE
SUPREME COURT OF THE UNITED STATES
OCTOBER TERM, 2020

MICHAEL WAYNE SHELLITO,

Petitioner,

vs.

STATE OF FLORIDA,

Respondent.

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Counsel for Petitioner, **MICHAEL WAYNE SHELLITO**, asks leave of this Court to allow Mr. Shellito to proceed **in forma pauperis** in this proceeding.

Mr. Shellito was found indigent by the state courts in Florida and was allowed to proceed **in forma pauperis**.

Accompanying this Motion is Petitioner's Affidavit in Support of Motion for Leave to Proceed in Forma Pauperis.

Pursuant to the Court's Rule 39, counsel respectfully requests Mr. Shellito be allowed to proceed **in forma pauperis**.

I HEREBY CERTIFY that a true copy of the foregoing has been furnished by United States mail, first class postage prepaid, to Holly M. Simcox, Assistant Attorney General, Office of the Attorney General, The Capitol, PL-01, Tallahassee, FL 32301, on July 13, 2021.

/s/ Martin J. McClain
MARTIN J. MCCLAIN
Fla. Bar No. 0754773
Law Office of Martin J. McClain
141 N.E. 30th Street
Wilton Manors, FL 33334
Telephone: (305) 984-8344
martymcclain@earthlink.net

COUNSEL FOR PETITIONER

ATTACHMENTS

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

I, Michael Shellito, 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>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Self-employment	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Interest and dividends	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Gifts	\$ <u>150.00</u>	\$ <u> </u>	\$ <u>150.00</u>	\$ <u> </u>
Alimony	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Child Support	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Unemployment payments	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Other (specify): _____	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Total monthly income:	\$ <u>150.00</u>	\$ <u> </u>	\$ <u>150.00</u>	\$ <u> </u>

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.) *None.*

Employer	Address	Dates of Employment	Gross monthly pay
			\$
			\$
			\$

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.) *N/A*

Employer	Address	Dates of Employment	Gross monthly pay
			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 15.00

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
<u>Inmate</u>	<u>Bank</u>	\$ <u>15.00</u>	\$ <u>N/A</u>

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings. *None.*

Home
Value _____

Other real estate
Value _____

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

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

Other assets
Description _____
Value _____

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

None.

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.

None.

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)	\$ 0	\$ <i>N/A</i>
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 0	\$ _____
Home maintenance (repairs and upkeep)	\$ 0	\$ _____
Food	\$ 100.00	\$ _____
Clothing	\$ 50.00	\$ _____
Laundry and dry-cleaning	\$ 0	\$ _____
Medical and dental expenses	\$ 0	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ _____
Life	\$ 0	\$ _____
Health	\$ 0	\$ _____
Motor Vehicle	\$ 0	\$ _____
Other: _____	\$ 0	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$ _____
Installment payments		
Motor Vehicle	\$ 0	\$ _____
Credit card(s)	\$ 0	\$ _____
Department store(s)	\$ 0	\$ _____
Other: _____	\$ 0	\$ _____
Alimony, maintenance, and support paid to others	\$ 0	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ _____
Other (specify): _____	\$ 0	\$ _____
Total monthly expenses:	\$ 150.00	\$ _____

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.

Incarcerated since 1994.

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

Executed on: May 12th, 2021, 2021

michael shellito
(Signature)

FLORIDA DEPARTMENT OF CORRECTIONS
 TRUST FUND ACCOUNT STATEMENT
 FACILITY: 304 - MARION C.I.
 FOR: 10/01/2020 - 10/31/2020

ACCT NAME: SHELLITO, MICHAEL
 BED: B2128L
 PO BOX:

ACCT#: 302491
 TYPE: INMATE TRUST

BEGINNING BALANCE 10/01/20

\$0.05

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/-	AMOUNT	BALANCE
10/02/20	137	PIE PAYROLL	P100220	000	PIE PAYROLL (AUTOMATED)	+	\$16.06	\$16.11
10/02/20	138	PROCESSING FEE	100220137762	000			\$0.50	\$15.61
10/02/20	187	JPAY DEPOSIT	122364244	000	MILLER, JENNIFER J.	+	\$20.00	\$35.61
10/04/20	112	JPAY DEPOSIT	122466763	000	SPANTON, ELIZABETH I.	+	\$250.00	\$285.61
10/05/20	063	CANTEEN SALES	304220201004	000		-	\$35.42	\$250.19
10/05/20	167	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.35	\$249.84
10/06/20	243	JPAY MEDIA W/D	000083971262	000		-	\$49.00	\$200.84
10/07/20	220	JPAY DEPOSIT	122576488	000	GREENBAUM, ROSA	+	\$75.00	\$275.84
10/07/20	220	JPAY DEPOSIT	122577686	000	MILLER, JENNIFER J.	+	\$25.00	\$300.84
10/08/20	063	CANTEEN SALES	304220201007	000		-	\$96.96	\$203.88
10/08/20	181	JPAY MEDIA W/D	000084117311	000		-	\$25.00	\$178.88
10/11/20	063	CANTEEN SALES	304220201010	000		-	\$2.29	\$176.59
10/12/20	163	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.99	\$175.60
10/13/20	225	JPAY DEPOSIT	122798587	000	SHELLITO, JOSEPH	+	\$150.00	\$325.60
10/16/20	063	CANTEEN SALES	304220201015	000		-	\$77.36	\$248.24
10/16/20	124	PIE PAYROLL	P101620	000	PIE PAYROLL (AUTOMATED)	+	\$14.78	\$263.02
10/16/20	125	PROCESSING FEE	101620124326	000		-	\$0.50	\$262.52
10/17/20	061	CANTEEN SALES	304220201016	000		-	\$16.23	\$246.29
10/19/20	165	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.94	\$245.35
10/22/20	206	JPAY DEPOSIT	123123397	000	MILLER, JENNIFER J.	+	\$40.00	\$285.35
10/23/20	063	CANTEEN SALES	304220201022	000		-	\$92.14	\$193.21
10/23/20	230	ACCESS CATALOG	3304	000		-	\$14.00	\$179.21
10/25/20	063	CANTEEN SALES	304220201024	000		-	\$1.94	\$177.27
10/26/20	165	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.94	\$176.33
10/30/20	119	PIE PAYROLL	P103020	000	PIE PAYROLL (AUTOMATED)	+	\$14.27	\$190.60
10/30/20	120	PROCESSING FEE	103020119781	000		-	\$0.50	\$190.10
10/30/20	176	JPAY DEPOSIT	123425564	000	MCDERMOTT, LINDA	+	\$75.00	\$265.10

ENDING BALANCE 10/31/20

\$265.10

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FACILITY: 304 - MARION C.I.
FOR: 11/01/2020 - 11/30/2020

ACCT NAME: SHELLITO, MICHAEL
BED: B2128L
PO BOX:

ACCT#: 302491
TYPE: INMATE TRUST

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/ -	AMOUNT	BALANCE
11/01/20	063	CANTEEN SALES	30420201031	000		-	\$ 58.82	\$206.28
11/01/20	130	JPAY MEDIA W/D	000085416681	000		-	\$ 20.00	\$186.28
11/02/20	063	CANTEEN SALES	30420201101	000		-	\$10.54	\$175.74
11/02/20	161	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.69	\$175.05
11/03/20	269	JPAY MEDIA W/D	000085551163	000		-	\$5.00	\$170.05
11/05/20	061	CANTEEN SALES	30420201104	000		-	\$14.38	\$155.67
11/06/20	146	JPAY DEPOSIT	123728822	000		-	\$120.00	\$275.67
11/06/20	160	JPAY DEPOSIT	123766140	000		-	\$20.00	\$295.67
11/07/20	063	CANTEEN SALES	30420201106	000		-	\$53.58	\$242.09
11/07/20	172	JPAY MEDIA W/D	000085754087	000		-	\$25.00	\$217.09
11/09/20	061	CANTEEN SALES	30420201108	000		-	\$30.12	\$186.97
11/09/20	163	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.98	\$185.99
11/12/20	059	CANTEEN SALES	30420201111	000		-	\$50.83	\$135.16
11/13/20	141	PIE PAYROLL	P111320	000	PIE PAYROLL (AUTOMATED)	-	\$16.20	\$151.36
11/13/20	142	PROCESSING FEE	111320141025	000		-	\$0.50	\$150.86
11/14/20	063	CANTEEN SALES	30420201113	000		-	\$32.13	\$118.73
11/15/20	063	CANTEEN SALES	30420201114	000		-	\$46.99	\$101.74
11/15/20	163	PROCESSING FEE	WEEKLY DRAW	000		-	\$1.00	\$100.74
11/16/20	276	ACCESS CATALOG	3304	000		-	\$34.44	\$66.30
11/18/20	063	CANTEEN SALES	30420201117	000		-	\$30.64	\$35.66
11/18/20	285	JPAY DEPOSIT	124212887	000	MILLER, JENNIFER J.	-	\$125.00	\$160.66
11/19/20	063	CANTEEN SALES	30420201118	000		-	\$28.01	\$132.65
11/20/20	063	CANTEEN SALES	30420201119	000		-	\$4.15	\$128.50
11/21/20	061	CANTEEN SALES	30420201120	000		-	\$36.44	\$92.06
11/23/20	164	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.99	\$91.07
11/24/20	063	CANTEEN SALES	30420201123	000		-	\$40.88	\$50.19
11/24/20	172	PIE PAYROLL	P112520	000	PIE PAYROLL (AUTOMATED)	-	\$7.62	\$57.81
11/24/20	173	PROCESSING FEE	112420172074	000		-	\$0.50	\$57.31
11/26/20	063	CANTEEN SALES	30420201125	000		-	\$5.52	\$51.79
11/28/20	063	CANTEEN SALES	30420201127	000		-	\$7.57	\$44.22
11/29/20	063	CANTEEN SALES	30420201128	000		-	\$30.41	\$13.81
11/30/20	163	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.84	\$12.97
					BEGINNING BALANCE 11/01/20			\$265.10
					ENDING BALANCE 11/30/20			

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FACILITY: 304 - MARION C.I.
FOR: 12/01/2020 - 12/31/2020

ACCT NAME: SHELLITO, MICHAEL
BED: B2128L
PO BOX:

ACCT#:
TYPE: 302491 INMATE TRUST

BEGINNING BALANCE 12/01/20

\$12.97

ENDING BALANCE 12/31/20

\$5.64

IBSR140 (74)

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FACILITY: 304 - MARION C.I.
FOR: 01/01/2021 - 01/31/2021

ACCT NAME: SHELLITO, MICHAEL
BED: B2128L
PO BOX:

ACCT#: 302491
TYPE: INMATE TRUST

BEGINNING BALANCE 01/01/21

\$5.64

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/-	AMOUNT	BALANCE
01/04/21	165	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.84	\$4.80
01/07/21	307	JPAY DEPOSIT	126211535	000	MILLER, JENNIFER J.	+	\$25.00	\$29.80
01/08/21	125	PIE PAYROLL	P010821	000	PIE PAYROLL (AUTOMATED)	+	\$4.87	\$34.67
01/08/21	126	PROCESSING FEE	010821125084	000		-	\$0.50	\$34.17
01/09/21	063	CANTEEN SALES	30420210108	000		-	\$28.84	\$5.33
01/11/21	167	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.29	\$5.04
01/15/21	255	JPAY DEPOSIT	126529946	000		+	\$50.00	\$55.04
01/17/21	061	CANTEEN SALES	30420210116	000		-	\$49.55	\$5.49
01/18/21	165	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.50	\$4.99
01/22/21	119	PIE PAYROLL	P012221	000	PIE PAYROLL (AUTOMATED)	+	\$18.27	\$23.26
01/22/21	120	PROCESSING FEE	012221119132	000		-	\$0.50	\$22.76
01/24/21	057	CANTEEN SALES	30420210123	000		-	\$22.03	\$0.73
01/24/21	114	JPAY DEPOSIT	126816652	000	MILLER, JENNIFER J.	+	\$25.00	\$25.73
01/25/21	151	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.22	\$25.51
01/31/21	061	CANTEEN SALES	30420210130	000		-	\$24.83	\$0.68
					ENDING BALANCE	01/31/21		\$0.68

IBSR140 (74)

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FACILITY: 304 - MARION C.I.
FOR: 02/01/2021 - 02/28/2021

ACCT NAME: SHELLITO, MICHAEL
BED: B2128L
PO BOX:

ACCT# : 302491
TYPE : INMATE TRUST

BEGINNING BALANCE 02/01/21 \$0.68

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER / PAYEE	+/-	AMOUNT	BALANCE
02/01/21	167	PROCESSING FEE	WEEKLY DRAW	000	\$0.25		\$0.43	
02/01/21	295	JPAY DEPOSIT	127128049	000	GREENBAUM, ROSA	+	\$25.00	\$25.43
02/05/21	121	PIE PAYROLL	P020521	000	PIE PAYROLL (AUTOMATED)	+	\$17.15	\$42.58
02/05/21	122	PROCESSING FEE	020521121094	000		-	\$0.50	\$42.08
02/05/21	283	JPAY DEPOSIT	127328259	000		+	\$25.00	\$67.08
02/06/21	059	CANTEEN SALES	30420210205	000	SKELLITO, JOSEPH	-	\$24.77	\$42.31
02/07/21	063	CANTEEN SALES	30420210206	000		-	\$28.11	\$14.20
02/08/21	171	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.53	\$13.67
02/09/21	063	CANTEEN SALES	30420210208	000		-	\$12.13	\$1.54
02/15/21	167	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.12	\$1.42
02/16/21	387	JPAY DEPOSIT	127701373	000	GREENBAUM, ROSA	+	\$25.00	\$26.42
02/19/21	121	PIE PAYROLL	P021921	000	PIE PAYROLL (AUTOMATED)	+	\$16.97	\$43.39
02/19/21	122	PROCESSING FEE	021921121117	000		-	\$0.50	\$42.89
02/21/21	063	CANTEEN SALES	30420210220	000		-	\$41.34	\$1.55
02/22/21	167	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.41	\$1.14

IBSR140 (74)

ACCT NAME: SHELLITO, MICHAEL
BED: B2128L
PO BOX:

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FACILITY: 304 - MARION C.I.
FOR: 03/01/2021 - 03/31/2021

ACCT#: 302491
TYPE: INMATE TRUST

BEGINNING BALANCE 03/01/21

\$1.14

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYER	+/-	AMOUNT	BALANCE
03/05/21	123	PIE PAYROLL	P030521	000	PIE PAYROLL (AUTOMATED)	+	\$24.04	\$25.18
03/05/21	124	PROCESSING FEE	030521123167	000		-	\$0.50	\$24.68
03/07/21	063	CANTEEN SALES	30420210306	000		-	\$23.93	\$0.75
03/08/21	171	PROCESSING FEE	128551567	000		-	\$0.24	\$0.51
03/10/21	549	JPAY DEPOSIT	30420210312	000	GREENBAUM, ROSA	+	\$50.00	\$50.51
03/13/21	063	CANTEEN SALES	30420210319	000		-	\$48.76	\$1.75
03/15/21	169	PROCESSING FEE	128887958	000		-	\$0.49	\$1.26
03/18/21	574	JPAY DEPOSIT	P031921	000	SHELLITO, JOSEPH	+	\$20.00	\$21.26
03/19/21	121	PIE PAYROLL	031921121121	000	PIE PAYROLL (AUTOMATED)	+	\$20.58	\$41.94
03/19/21	122	PROCESSING FEE	30420210326	000		-	\$0.50	\$41.44
03/20/21	063	CANTEEN SALES	30420210328	000		-	\$2.35	\$39.09
03/22/21	171	PROCESSING FEE	128887958	000		-	\$0.02	\$39.07
03/27/21	063	CANTEEN SALES	30420210326	000		-	\$25.44	\$13.63
03/29/21	061	CANTEEN SALES	30420210328	000		-	\$12.62	\$1.01
03/29/21	169	PROCESSING FEE	128887958	000		-	\$0.38	\$0.63
					ENDING BALANCE	03/31/21		\$0.63

04/01/21
07:10:19
PAGE 117