

21-5383

Motion and Affidavit for Permission to Appeal In Forma Pauperis

MARK STINSON REG #29908-076

v.

Appeal No. 21-2106

District Court or Agency No 2:21-cv-00025-BSM

John P. Yates, Warden

Affidavit in Support of Motion

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Signed: John P. Yates

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks; if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: July 26, 2021

My issues on appeal are: Violation of Constitutional Rights, Violations of Sixth Amendment Rights, Ineffectiveness of Counsel, Conflict of interest, Violation of Due Process, Misconduct of Justice, Witness tampering.

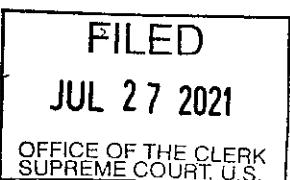
1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any 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>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Gifts	\$ <u>50</u>	\$ <u>N/A</u>	\$ <u>50</u>	\$ <u>N/A</u>
Alimony	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>



ORIGINAL

Child support	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Other (specify):	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>50</u>	\$ <u>N/A</u>	\$ <u>50</u>	\$ <u>N/A</u>

2. List your employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
<u>B.D.P.</u>	<u>Forrest City, AR</u>	<u>4-18/3-19</u>	<u>\$ 0</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

3. List your spouse's employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

4. How much cash do you and your spouse have? \$ 1,400

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>BOP/</u> <u>N/A</u>	<u>Prisoner</u> <u>N/A</u>	<u>\$ 99</u> <u>\$ N/A</u>	<u>\$ 0</u> <u>\$ N/A</u>

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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

N/A

Home (Value)
N/A

Other real estate (Value)
N/A

Motor vehicle #1 (Value)

Motor vehicle #2 (Value)
Make & year: N/A
Model: N/A
Registration #: N/A

Other assets (Value)
N/A

Make & year: N/A
Model: N/A
Registration #: N/A
Other assets (Value)
N/A

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

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

Name
N/A

Relationship
N/A

Age
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, semiannually, or annually to show the monthly rate.

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)

\$ 0

\$ N/A

Home maintenance (repairs and upkeep)

\$ 0

\$ N/A

Food

\$ 0

\$ N/A

Clothing

\$ 0

\$ N/A

Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>N/A</u>
Medical and dental expenses	\$ <u>2</u>	\$ <u>N/A</u>
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in Mortgage payments)	\$ <u>0</u>	\$ <u>N/A</u>
Homeowner's or renter's	\$ <u>0</u>	\$ <u>N/A</u>
Life	\$ <u>0</u>	\$ <u>N/A</u>
Health	\$ <u>0</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0</u>	\$ <u>N/A</u>

Taxes (not deducted from wages or included in
Mortgage payments) (specify): IRS \$ 2.8 million \$ 2.8 million

Installment payments

Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Credit card (name): _____	\$ <u>0</u>	\$ <u>N/A</u>
Department Store (name): _____	\$ <u>0</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>2</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:

A/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? \$ _____

If yes, state the person's name, address, and telephone number:

A/A

12. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

I have no job.

13. State the address of your legal residence.

F.C.L. Forrest City, AR P.O. Box 9000
Forrest City, AR 72336

Your daytime phone number: (870) 630-6000

Your age: 55 Your years of schooling: 14

Your social-security number: 0253