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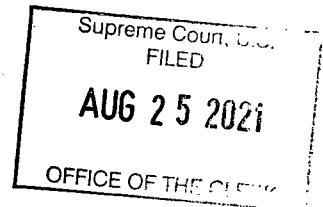
No. 21-5577  
(TO BE ASSIGNED BY CLERK)

**ORIGINAL**

IN THE

SUPREME COURT OF THE UNITED STATES

TERRY DARNELL ANDERSON — PETITIONER  
(Your Name)



VS.  
SECRETARY, FLORIDA DEPARTMENT OF CORRECTIONS; AND  
ATTORNEY GENERAL, STATE OF FLORIDA — 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):

DIRECT APPEAL - 19<sup>TH</sup> JUDICIAL CIRCUIT COURT, ST. LUCIE COUNTY, FLORIDA

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.

*1st Terry Anderson*

(Signature)

TERRY D. ANDERSON, I/C # 384760  
MARION CORRECTIONAL INSTITUTION  
P.O. BOX 158  
LOWELL, FL 32663-0158

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

I, TERRY DARNELL ANDERSON, 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	\$ 50.00	\$ N/A	\$ 50.00	\$ N/A
Self-employment	\$ 0	\$ N/A	\$ 0	\$ N/A
Income from real property (such as rental income)	\$ 0	\$ N/A	\$ 0	\$ N/A
Interest and dividends	\$ 0	\$ N/A	\$ 0	\$ N/A
Gifts	\$ 100.00	\$ N/A	\$ 100.00	\$ N/A
Alimony	\$ 0	\$ N/A	\$ 0	\$ N/A
Child Support	\$ 0	\$ N/A	\$ 0	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ N/A	\$ 0	\$ N/A
Disability (such as social security, insurance payments)	\$ 0	\$ N/A	\$ 0	\$ N/A
Unemployment payments	\$ 0	\$ N/A	\$ 0	\$ N/A
Public-assistance (such as welfare)	\$ 0	\$ N/A	\$ 0	\$ N/A
Other (specify): <u>None</u>	\$ 0	\$ N/A	\$ 0	\$ N/A
<b>Total monthly income:</b>	<b>\$ 150.00</b>	<b>\$ 0</b>	<b>\$ 150.00</b>	<b>\$ 0</b>

\* Spouse = Not Applicable ("N/A")

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
MANSON CORRECTIONAL INSTITUTION	P.O. Box 158 LOWELL, FL 32663	2018 - CURRENT	\$ 50.00 (CANTEEN OPERATOR)
			\$
			\$

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
NOT APPLICABLE.	NOT APPLICABLE.	NOT APPLICABLE.	\$      0
			\$      0
			\$      0

4. How much cash do you and your spouse have? \$ 0  
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
INMATE TRUST ACCOUNT	\$ 1,400.00	\$ N/A
	\$      0	\$      0
	\$      0	\$      0

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>0</u>	<input type="checkbox"/> Other real estate Value <u>0</u>
<input type="checkbox"/> Motor Vehicle #1 Year, make & model <u>NONE</u> Value <u>0</u>	<input type="checkbox"/> Motor Vehicle #2 Year, make & model <u>NONE</u> Value <u>0</u>
<input type="checkbox"/> Other assets Description <u>NONE</u> Value <u>0</u>	

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

**Person owing you or your spouse money**

NONE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Amount owed to you**

\$ 0  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

**Amount owed to your spouse**

\$ NOT APPLICABLE  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

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**

NONE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Relationship**

NOT APPLICABLE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Age**

NOT APPLICABLE  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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)

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

\$ 80.00 \$ N/A

Clothing

\$ 40.00 \$ N/A

Laundry and dry-cleaning

\$ 0 \$ 0

Medical and dental expenses

\$ 0 \$ 0

8. Do you expect to receive, or do you normally receive <b>You</b> <b>spouse</b> <b>Both</b> <b>or</b> <b>either</b> <b>of</b> <b>you</b> <b>alone</b> <b>or</b> <b>in</b> <b>addition</b> <b>to</b> <b>any</b> <b>other</b> <b>income</b> ?		<b>Your spouse</b>	
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>N/A</u>	
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>15.00</u>	\$ <u>N/A</u>	
Insurance (not deducted from wages or included in mortgage payments)			
Homeowner's or renter's insurance	\$ <u>0</u>	\$ <u>N/A</u>	
Life insurance	\$ <u>0</u>	\$ <u>N/A</u>	
Health (not including dental, medical, and hospital expenses)	\$ <u>0</u>	\$ <u>N/A</u>	
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>	
Other: <u>None</u>	\$ <u>0</u>	\$ <u>N/A</u>	
Taxes (not deducted from wages or included in mortgage payments)			
(specify): <u>None</u>	\$ <u>0</u>	\$ <u>N/A</u>	
Installment payments			
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>	
Credit card(s)	\$ <u>0</u>	\$ <u>N/A</u>	
Department store(s)	\$ <u>0</u>	\$ <u>N/A</u>	
Other: <u>None</u>	\$ <u>0</u>	\$ <u>N/A</u>	
Alimony, maintenance, and support paid to others			
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>N/A</u>	
Other (specify): <u>HYGIENE ITEMS</u>	\$ <u>15.00</u>	\$ <u>N/A</u>	
Total monthly expenses:		\$ <u>150.00</u>	\$ <u>0</u>

IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT  
IN AND FOR ST. LUCIE COUNTY, FLORIDA

STATE OF FLORIDA  
Plaintiff,

vs.

TERRY DARRELL ANDERSON,  
Defendant.

CASE NO.: 562009CF001510A

JUDGE: VAUGHN

ORDER OF INDIGENCY AND  
APPOINTMENT OF THE PUBLIC DEFENDER

The Defendant having filed a Notice of Appeal from the judgment and sentence, and the Court having determined the Defendant to be indigent and unable to bear the costs of this appeal, it is upon Motion of the Defendant;

**ORDERED AND ADJUDGED** that this Court determines the Defendant to be indigent for the purpose of appeal and hereby appoints the Public Defender of the Nineteenth Judicial Circuit, 216 South Second Street, Fort Pierce, Florida 34950, (772) 462-2048, to represent the Defendant on the appeal. All costs necessary and incident to the Defendant's appeal shall be paid by the State of Florida.

DONE AND ORDERED at Fort Pierce, St. Lucie County, Florida this 1 day of  
December, 2010.

lucell  
\_\_\_\_\_  
Dan L. Vaughn

Circuit Court Judge

cc: Donald A. Chinquina, P.A.  
Jennifer Day, Assistant State Attorney  
Attorney General

2010 DEC -2 AM 10:48  
ST. LUCIE COUNTY  
CLERK OF THE CIRCUIT COURT  
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