

No. 21-5788

ORIGINAL
Supreme Court, U.S.
FILED
SEP 17 2021
OFFICE OF THE CLERK

IN THE
SUPREME COURT OF THE UNITED STATES

PAUL J. BEGNOCHE, SR. — PETITIONER
(Your Name)

VS.

SUPERINTENDENT SCI MERCER: PA ATTORNEY GENERAL'S — RESPONDENT(S)
OFFICE: ATT TO BE NOTICED: RYAN H. LYSAGHT

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 COURT OF APPEALS FOR THE THIRD CIRCUIT: MIDDLE DISTRICT COURT OF THE THIRD

CIRCUIT: PENNSYLVANIA SUPREME COURT: PENNSYLVANIA SUPERIOR COURT, LOWER COURT

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.

Paul J. Begnoche, Sr.
(Signature)

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

I, Paul J. Begnoche, Sr, 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
Prison Employment				
Employment	\$ <u>57.33</u>	\$ <u>00.00</u>	\$ <u>57.33</u>	\$ <u>00.00</u>
Self-employment	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Income from real property (such as rental income)	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Interest and dividends	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Gifts	\$ <u>65.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Alimony	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Child Support	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Disability (such as social security, insurance payments)	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Unemployment payments	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Public-assistance (such as welfare)	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
Other (specify): _____	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>	\$ <u>00.00</u>

Total monthly income: \$ 57.33 \$ 00.00 \$ 00.00 \$ 00.00

All ~~appellant~~ inmate's monies are attached by PA DOC Act 84 by 25%, to include all gift money

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
PA DOC SCI MERCER	801 Butler Pike Mercer, PA		\$ 57.33
			\$ Minus act 84
			\$ 25% deductions
			Minus 25% Deduction

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.) Not married

Employer	Address	Dates of Employment	Gross monthly pay
not applicable	not applicable	not applicable	\$ 00.00
			\$
			\$

4. How much cash do you and your spouse have? \$ None

Below, state any money you or your spouse have in bank accounts or in any other financial institution. I have no current bank accounts/ PA DOC Personal Inmate Accounts

Financial institution	Type of account	Amount you have	Amount your spouse has
PA DOC Inmate Personal	Trust Account	\$ <u>None</u>	\$ <u>00.00</u>
		\$	\$
		\$	\$

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

Home
Value none

Other real estate
Value none

Motor Vehicle #1
Year, make & model none
Value

Motor Vehicle #2
Year, make & model none
Value

Other assets
Description after (12) yrs incarceration I have "NO" Assets
Value

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
<u>NONE</u>	\$ <u>NONE</u>	\$ <u>have no spouse</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

Name	Relationship	Age
<u>NONE</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.

	<u>You incarcerated</u>	<u>Your spouse</u>
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>none</u>	\$ <u>no spouse</u>
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)	\$ <u>37.00</u>	\$ <u>no spouse</u>
Home maintenance (repairs and upkeep)	\$ <u>00.00</u>	\$ <u>" "</u>
Food	\$ <u>50.00</u>	\$ <u>" "</u>
Clothing	\$ <u>varies</u>	\$ <u>" "</u>
Laundry and dry-cleaning	\$ <u>00.00</u>	\$ <u>" "</u>
Medical and dental expenses	\$ <u>varies</u>	\$ <u>" "</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 00.00	\$ non spouse
Cable TV Bill		
Recreation, entertainment, newspapers, magazines, etc.	\$ 17.00	\$ " "
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 00.00	\$ " "
Life	\$ 00.00	\$ " "
Health	\$ 00.00	\$ " "
Motor Vehicle	\$ 00.00	\$ " "
Other: <u>Pennsylvania Court attachment</u>	\$ 25% of every	\$ " "
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>NONE</u>	\$	\$ " "
Installment payments		
Motor Vehicle	\$ 00.00	\$ " "
Credit card(s)	\$ 00.00	\$ " "
Department store(s) <u>Prison commissary</u>	\$ 50-\$80.00	\$ " "
Other: _____	\$ 00.00	\$ " "
Alimony, maintenance, and support paid to others	\$ 00.00	\$ " "
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 00.00	\$ " "
Other (specify): _____	\$	\$
Total monthly expenses:	\$ 100.00	\$ " "

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 Forced to proceed soley Pro-se in all Pennsylvania/Federal Courts

If yes, how much? About \$8.00

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?

COPY COSTS - Postage

Yes No

About \$25.00 in copies and about \$15.00 in Postage for this Writ
If yes, how much? \$40.00

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 have been incarcerated against my liberty Interest for (11-1/2) yrs while every single dollar deposited into my PA DOC Personal Inmate trust account is attached Illegally by PA DOC under Act 84 for 25% of all monies. I am forced to purchase a great deal of my own food due to insufficient/or poorly prepared DOC food, and must purchase under-wear/sweat cloths/sneakers soley on my own because not supplied by PA DOC.

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

Executed on: September 10, 2021, 20²¹

Paul J. Begnoch, Sr.
(Signature)

No. _____

Commonwealth of Pennsylvania
County of Mercer

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(Your Name)

VS.

SUPERINTENDENT SCI MERCER: ATTORNEY GENERAL-PA RESPONDENT(S)

ATTORNEY TO BE NOTICED: RYAN H. LYSAGHT

DECLARATION OF INDIGENCE

I Paul J. Begnoche, Sr respectfully declare as Sworn Statement to Rule 39, I am an inmate Incarcerated within Pennsylvania Department of Corrections for more than (11-1/2) Years, and am absolutely indigent by all Legal standards. I have been granted Leave to Proceed In Forma Pauperis in every level of the Commonwealth of Pennsylvania Appellate Courts; in the Middle District Court of Pennsylvania, and the United States Court of Appeals for the Third Circuit of Pennsylvania.

There has been no significant change in my financial situation since rulings of these said Courts that have granted me Leave to Proceed In Forma Pauperis. I rely on my Pennsylvania DOC employment on the Inside Grounds Maintenance Crew employment compensation of about \$56.00 monthly. Which is attached by 26% for Dauphin County, PA Court Costs/Fines. I can not rely on friend/or family gifts as a reliable source of income, and when i am gifted money it is also attached by 26% for Court Costs. Therefore, I respect attest I am in Fact Indigent and have been through over (11) yrs of incarceration.

Paul J. Begnoche, Sr
PA DOC KH1738
SCI MERCER
801 Butler Pike
Mercer, PA 16137-5653
Paul J. Begnoche, Sr
Paul J. Begnoche, Sr
PA DOC KH1738

Sworn to and subscribed before me
this 16 day of Aug, 2021

Linda DeForest

Commonwealth of Pennsylvania - Notary Seal
Linda DeForest, Notary Public
Mercer County
My commission expires July 12, 2022
Commission number 1256553
Member, Pennsylvania Association of Notaries