

USCA 21-6343556

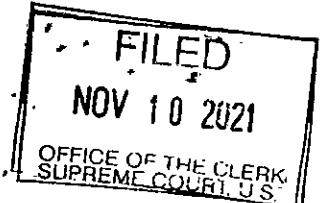
NO. USCA3 No. 21-1556
IN THE UNITED STATES OF AMERICA

IN THE
SUPREME COURT OF THE UNITED STATES

Johnathan Robins - PETITIONER
(Your Name)

VS.

Supt. Rockview, et al - RESPONDENT(S)



APPLICATION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

TO THE HONORABLE CHIEF JUSTICE AND JUSTICE(S) OF THE SAID COURT:

AND NOW, I, Johnathan Robins, pro se, Petitioner, hereby moves for leave to proceed In Forma Pauperis in the Supreme Court of the United States in accordance with 28 U.S.C. § 1915.

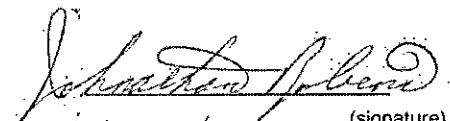
Petitioner, sought leave to proceed In Forma Pauperis in the Eastern District of Pennsylvania and leave to proceed In Forma Pauperis was Granted.

Petitioner hereby avers the following in the attached/ enclosed Declaration in Support of In Forma Pauperis, in support thereof.

WHEREFORE, I respectfully request that I, Johnathan Robins be granted leave to proceed without payment of fees and costs, to include but not limited to, filing fees, cost of reproducing the original record, and copies thereof, and any and all other costs necessary to proceed with this appeal.

Respectfully Submitted,

Date: Nov. 10, 2021


Johnathan Robins
(signature)
Johnathan Robins
(print name)

Pro Se, Petitioner
S.C.I. Rockview, # J99849
Rockview Place, Box A
Bellefonte, PA 16823-0820

IN THE SUPREME COURT OF THE
UNITED STATES

Johnathan Robins,
petitioner
- against -
Superintendent of Rockview, et.al.,
Respondents

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

I the petitioner, Johnathan Robins, am unable to pay the costs of the filing of Petition For Writ of Certiorari and request leave to proceed in forma pauperis.

In support of request to proceed in forma pauperis I make the following statements under penalty of perjury:

I do not have any property or bank accounts.

I am an inmate in Pa. state prison.
I have no support from outside.
I make about \$30 a month from my prison job.

My prison account statement is attached.

My expenses are legal copies and legal mail.

I was permitted to proceed in forma pauperis in the 3rd Circuit of Appeals and in the Eastern District of Pa, documents attached.

For the above reasons Motion should be Granted.

Respectfully Submitted,

Date 9-10-21

Johnathan Robins

Johnathan Robins

I declare under penalty of perjury that the above is true and correct to the best of my knowledge and belief and are subject to the penalties of 28 USC § 1746

Date 9-10-21

Johnathan Robins

Johnathan Robins

IN THE
SUPREME COURT OF THE UNITED STATES

Johnathan Robins - PETITIONER
(Your Name)

VS.

Supt. Rockview, et al. - RESPONDENT(S)

DECLARATION IN SUPPORT OF IN FORMA PAUPERIS

I swear or affirm under penalty of perjury that, because of my poverty, I cannot pre-pay the docket fees of any 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 in this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621).

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to the 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.

Signed: Johnathan Robins

Date: NOV, 10, 2021

My issues on appeal are (brief summary): Whether Petitioner rights were violated by not allowing him to present a marriage defense to sex charges. Whether Petitioner's rights were violated for him being held for a crime he was not convicted of because of a Clerical Error. Whether trial Court violated Petitioner's Pro Se rights by court filing defense motions and keeping counsel on Petitioner's appeal.

. 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>Prisec Job</u>)	\$ <u>30</u>	\$ <u>0</u>	\$ <u>30</u>	\$ <u>0</u>
Total Monthly Income:	\$ <u>30</u>	\$ <u>0</u>	\$ <u>30</u>	\$ <u>0</u>

. 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>Pa. Dept. of</u>	<u>Box A, Bellefonte, Pa</u>	<u>Jan 2011</u>	<u>\$ 30</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>
			\$
			\$
			\$
			\$
			\$
			\$

. How much cash do you and your spouse have? \$ 946.69 (Account statement)
 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>Prison</u>	<u>Account Statement</u>	\$ <u>946.69</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 balance during the last six months in your institutional accounts. If you have multiple accounts, perhaps 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.

Home (value)	Other real estate (value)	Motor vehicle # 1 (value)
<u>N/A</u>	<u>N/A</u>	Make & year: <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	Model: <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	Registration #: <u>N/A</u>
Motor vehicle # 2 (value)	Other assets (value)	Other assets (value)
Make & year: <u>N/A</u>	<u>N/A</u>	<u>N/A</u>

Model: N/A Registration #: N/A

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>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

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>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

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.

	You	Spouse
Rent or home - mortgage payment (include lot rent for mobile home)	\$ <u>0</u>	\$ <u>0</u>
Are real-estate taxes included?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is property insurance included?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Utilities (electricity, heating fuel, water, sewer, and Telephone)	\$ <u>0</u>	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>0</u>
Food	\$ <u>0</u>	\$ <u>0</u>
Clothing	\$ <u>0</u>	\$ <u>0</u>

Laundry and dry -		
cleaning	\$ <u>0</u>	\$ <u>0</u>
Medical and dental		
expenses	\$ <u>0</u>	\$ <u>0</u>
Transportation (not		
including motor		
vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment,		
newspapers, magazines,		
etc.	\$ <u>0</u>	\$ <u>6</u>
Insurance (not deducted		
From wages or included		
in Mortgage payments)		
Homeowner's or		
renter's	\$ <u>0</u>	\$ <u>0</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Taxes (not deducted		
from wages or included		
in Mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ <u>0</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit Card		
(name) _____	\$ <u>0</u>	\$ <u>0</u>
Department store		
(name) _____	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Alimony, maintenance,		
and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expenses for		
operation of business,		
profession, or farm (attach		
detailed statement)	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>Legal</u>	\$ <u>30</u>	\$ <u>0</u>
Total Monthly Expenses:	\$ <u>30</u>	\$ <u>0</u>

. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next twelve months?

Yes No

If yes, describe on an attached sheet.

. 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? \$ N/A

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: _____

. Provide any other information that will help explain why you cannot pay the docket fees for your appeal. I am an inmate in a state prison with a prison job.

. State the address of your legal residence. Box A, Bellefonte, Pa
16823

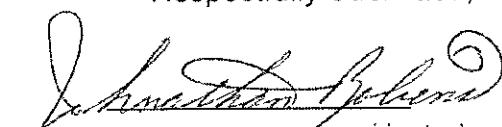
Your daytime phone number: _____

Your age: 55 Your years of schooling: 12+

Your social-security number: 211-56-2604

Respectfully Submitted,

Date: Nov. 10, 2021


(signature)
Jonathan Robins
(print name)

Pro Se, Petitioner
S.C.I. Rockview, # JP9849
Rockview Place, Box A
Bellefonte, PA 16823-0820

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

JOHNATHAN ROBINS,

: CIVIL ACTION

v.

: NO. 18-1385

SUPERINTENDENT OF ROCKVIEW SCI.

ORDER

AND NOW, this 16th day of June 2021, upon consideration of the Petitioner's motion to for Permission to Appeal *In Forma Pauperis*, **IT IS HEREBY ORDERED AND DECREED** that the motion is **GRANTED**.

BY THE COURT:

/s/ Petrese B. Tucker

Hon. Petrese B. Tucker, U.S.D.J.

UNITED STATES COURT OF APPEALS FOR THE THIRD CIRCUIT

No. 21-1556

Robins v. Superintendent Rockview SCI
(E.D. Pa. No. 2-18-cv-01385)

To: Clerk

1) Motion by Appellant for leave to appeal in forma pauperis

The foregoing motion to proceed in forma pauperis is granted. The Court may reconsider in forma pauperis status or request additional information at any time during the course of these proceedings.

For the Court,

s/ Patricia S. Dodszuweit
Clerk

Dated: April 22, 2021

CJG/cc: Johnathan Robins
David Napiorski, Esq.
Ronald Eisenberg, Esq.