

USCA3 21-6343556

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

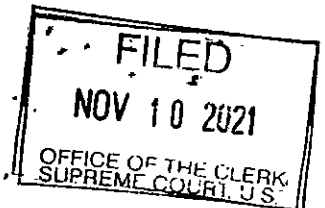
IN THE  
SUPREME COURT OF THE UNITED STATES

Johnathan Robins - PETITIONER  
(Your Name)

VS.

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

ORIGINAL



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.

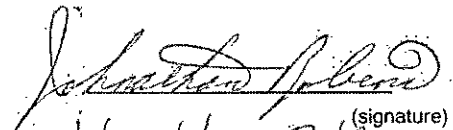
Petitioner, sought leave to proceed In Forma Pauperis in the Eastern  
District of Pennsylvania and leave to proceed In Forma  
Pauperis was Granted.

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.

Date: Nov 10, 2021

Respectfully Submitted,

  
(signature)  
Johnathan Robins  
(print name)

Pro Se, Petitioner  
S.C.I. Rockview, # JP9849  
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 U.S.C. § 1746

Date 9-10-21

Johnathan Robins

Johnathan Robins

No. USCA3 No. 21-1556

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IN THE  
SUPREME COURT OF THE UNITED STATES

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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>Prison 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. D.O.C.</u>	<u>Box A, Bellefonte, Pa</u>	<u>Jan 2011</u>	\$ <u>30</u>
<u> </u>	<u> </u>	<u> </u>	\$ <u> </u>
<u> </u>	<u> </u>	<u> </u>	\$ <u> </u>
<u> </u>	<u> </u>	<u> </u>	\$ <u> </u>
<u> </u>	<u> </u>	<u> </u>	\$ <u> </u>
<u> </u>	<u> </u>	<u> </u>	\$ <u> </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
N/A	N/A	N/A	\$ N/A
			\$
			\$
			\$
			\$
			\$

How much cash do you and you 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
Prison	Account Statement	\$ 946.69	\$ N/A
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

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)
N/A	N/A	Make & year: N/A
N/A	N/A	Model: N/A
N/A	N/A	Registration #: N/A
Motor vehicle # 2 (value)	Other assets (value)	Other assets (value)
Make & year: N/A	N/A	N/A

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

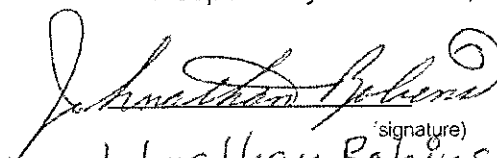
Your daytime phone number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Your age: 55 Your years of schooling: 12+

Your social-security number: 211-56-2604

Respectfully Submitted,

Date: Nov. 10, 2021

  
Johnathan Robins  
(signature)  
(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,

v.

SUPERINTENDENT OF ROCKVIEW SCI.

CIVIL ACTION

NO. 18-1385

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

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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. Dodszeit  
Clerk

Dated: April 22, 2021

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