

21 No. 6899

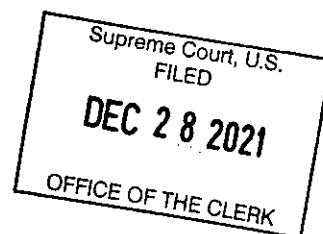
IN THE
SUPREME COURT OF THE UNITED STATES

ORIGINAL

JOHN ALBERTS,
Petitioner,

v.

GRADY PERRY,
Respondent.



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:

☒ [X] Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

United States District Court for the Middle District of Tennessee
Case No. 3:20-cv-00408, Judge Richardson

☐ [] Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

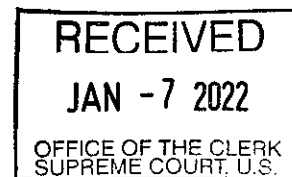
☒ [X] Petitioner's affidavit or declaration in support of this motion is attached hereto.

☐ [] 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.

John Alberts
(Signature)





0088-13

JAN 1970

SECRET

CONFIDENTIAL

1. The purpose of this document is to provide information regarding the activities of the [redacted] in the [redacted] area.

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

I, John Alberts, 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 | \$ <u>130.⁰⁰</u> | \$ <u>N/A</u> | \$ <u>120.⁰⁰</u> | \$ <u>N/A</u> |
| Self-employment | \$ <u>0.⁰⁰</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>0</u> | \$ <u>N/A</u> | \$ <u>0</u> | \$ <u>N/A</u> |
| Alimony | \$ <u>0</u> | \$ <u>N/A</u> | \$ <u>0</u> | \$ <u>N/A</u> |
| 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>130.⁰⁰</u> | \$ <u>N/A</u> | \$ <u>120.⁰⁰</u> | \$ <u>N/A</u> |

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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 |
|----------|-------------------|---------------------|-----------------------|
| TDOC | Clifton, TN 38423 | 2014 - Current | \$ 130. ⁰⁰ |
| N/A | N/A | N/A | \$ 0 |
| N/A | N/A | N/A | \$ 0 |

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 |
|----------|---------|---------------------|-------------------|
| N/A | N/A | N/A | \$ N/A |
| N/A | N/A | N/A | \$ N/A |
| N/A | N/A | N/A | \$ N/A |

4. How much cash do you and your spouse have? \$ 220.⁰⁰ (Inmate Trust Fund balance)
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 Fund | \$ 220. ⁰⁰ | \$ N/A |
| N/A | \$ 0 | \$ N/A |
| N/A | \$ 0 | \$ N/A |

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 N/A | <input type="checkbox"/> Other real estate Value N/A |
| <input type="checkbox"/> Motor Vehicle #1 Year, make & model N/A Value N/A | <input type="checkbox"/> Motor Vehicle #2 Year, make & model N/A Value N/A |
| <input type="checkbox"/> Other assets Description N/A Value N/A | |

1. The first part of the report

2. The second part of the report

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18. The eighteenth part of the report

19. The nineteenth part of the report

20. The twentieth part of the report

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>0</u> | \$ <u>N/A</u> |
| <u>None</u> | \$ <u>0</u> | \$ <u>N/A</u> |
| <u>none</u> | \$ <u>0</u> | \$ <u>N/A</u> |

7. State the person 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 | Relationship | Age |
|-----------------------|---------------|------------|
| <u>Sheila Alberts</u> | <u>Mother</u> | <u>62</u> |
| <u>None</u> | <u>N/A</u> | <u>N/A</u> |
| <u>none</u> | <u>N/A</u> | <u>N/A</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.

| | You | Your spouse |
|---|-------------|---------------|
| Rent or home-mortgage payment (include lot rented for mobile home) | \$ <u>0</u> | \$ <u>N/A</u> |
| Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>N/A</u> | | |
| Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No <u>N/A</u> | | |
| Utilities (electricity, heating fuel, water, sewer, and telephone) | \$ <u>0</u> | \$ <u>N/A</u> |
| Food | \$ <u>0</u> | \$ <u>N/A</u> |
| Clothing | \$ <u>0</u> | \$ <u>N/A</u> |
| Laundry and dry-cleaning | \$ <u>0</u> | \$ <u>N/A</u> |
| Medical and dental expenses | \$ <u>0</u> | \$ <u>N/A</u> |

Figure 1. The effect of the concentration of the *Agaricus bisporus* spores on the growth of *Agaricus bisporus* and *Agaricus bisporus* spores on the growth of *Agaricus bisporus*.

Figure 1. The effect of the concentration of the H_2O_2 solution on the amount of the released H_2O from the H_2O_2 -loaded hydrogel. The amount of the released H_2O was measured by the weight difference of the hydrogel before and after the release. The concentration of the H_2O_2 solution was 0.1, 0.2, 0.3, 0.4, 0.5, 0.6, 0.7, 0.8, 0.9, and 1.0 wt. %.

$\frac{1}{2}(\mathbf{b} + \mathbf{b}^*) = \mathbf{b}$ and $\frac{1}{2}(\mathbf{b} - \mathbf{b}^*) = \mathbf{b}^*$ are the components of \mathbf{b} in the direction of \mathbf{a} and perpendicular to \mathbf{a} , respectively.

1. The first step is to identify the problem or question that needs to be answered. This involves understanding the context and the specific requirements of the task.

1. *Phragmites australis* (Cav.) Trin. ex Steud.

| | You | Your spouse |
|---|-----------------------------------|----------------------|
| Transportation (not including motor vehicle payments) | \$ <u>0</u> | \$ <u>N/A</u> |
| Recreation, entertainment, newspaper, magazines, etc. | \$ <u>0</u> | \$ <u>N/A</u> |
| Insurance (not deducted from wages or included in mortgage payments) | | |
| 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>none</u> | \$ <u>0</u> | \$ <u>N/A</u> |
| Taxes (not deducted from wages or included in mortgage payments) | | |
| (specify): <u>N/A</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 | \$ <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>Court Fees</u> | \$ <u>65.⁰⁰</u> | \$ <u>N/A</u> |
| Total monthly expenses: | \$ <u>65.⁰⁰</u> | \$ <u>N/A</u> |

Dear Sir,

I have the honor to acknowledge the receipt of your letter of the 10th inst.

and in reply to inform you that the same has been forwarded to the proper authorities for their consideration.

I am, Sir, very respectfully,
Your obedient servant,

J. H. [Signature]

I am, Sir, very respectfully,
Your obedient servant,

J. H. [Signature]

I am, Sir, very respectfully,
Your obedient servant,

J. H. [Signature]

I am, Sir, very respectfully,
Your obedient servant,

J. H. [Signature]

9. Do you expect any major change 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? not applicable (N/A)

If yes, state the attorney's name, address, and telephone number.

None

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? not applicable (N/A)

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

None

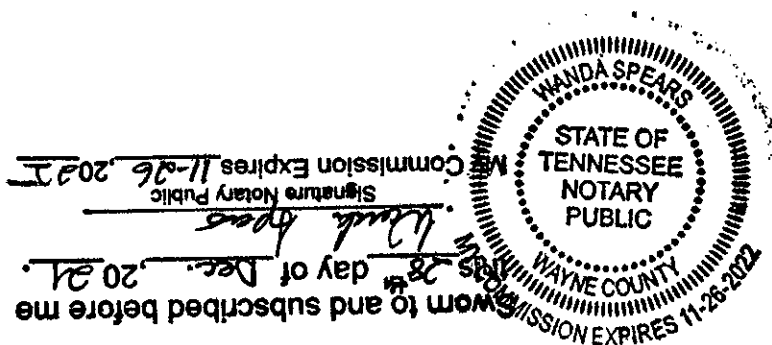
12. Provide any other information that will help explain why you cannot pay the costs of this case.


My only source of income is from a prison job assignment. I gift the money earned from my job assignment to my disabled/low income mother.

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

Executed on: December 28, 2021

John Albert
(Signature)





U.S. DEPARTMENT OF STATE
OFFICE OF THE INSPECTOR GENERAL
WASHINGTON, D.C. 20520
JAN 11 1980
100-100000-100000