21-6899

No.

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

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)

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	$ 130.00	$ N/A	$ 120.00	$ N/A
Self-employment	$ 0.00	$ 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	$ 0	$ N/A	$ 0	$ 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):	$ 0	$ N/A	$ 0	$ N/A
Total monthly income:	$ 130.00	$ N/A	$ 120.00	$ 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
TDOC	Clifton, TN 38425	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.

[ ] Home
Value N/A

[ ] Other real estate
Value N/A

[ ] Motor Vehicle #1
Year, make & model N/A
Value N/A

[ ] Motor Vehicle #2
Year, make & model N/A
Value N/A

[ ] Other assets
Description N/A
Value N/A

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
none	$ 0	$ N/A
none	$ 0	$ N/A
none	$ 0	$ N/A

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
Sheila Alberts	Mother	62
none	N/A	N/A
none	N/A	N/A

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) Are real estate taxes included? [ ] Yes [ ] No N/A Is property insurance included? [ ] Yes [ ] No N/A	$ 0	$ N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	$ 0	$ N/A
Food	$ 0	$ N/A
Clothing	$ 0	$ N/A
Laundry and dry-cleaning	$ 0	$ N/A
Medical and dental expenses	$ 0	$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	$ 0	$ N/A
Recreation, entertainment, newspaper, magazines, etc.	$ 0	$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	$ 0	$ N/A
Life	$ 0	$ N/A
Health	$ 0	$ N/A
Motor Vehicle	$ 0	$ N/A
Other: none	$ 0	$ N/A
Taxes (not deducted from wages or included in mortgage payments)		
(specify): N/A	$ 0	$ N/A
Installment payments		
Motor Vehicle	$ 0	$ N/A
Credit card(s)	$ 0	$ N/A
Department store(s)	$ 0	$ N/A
Other: none	$ 0	$ N/A
Alimony, maintenance, and support paid to others	$ 0	$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	$ 0	$ N/A
Other (specify): Court Fees	$ 65.00	$ N/A
Total monthly expenses:	$ 65.00	$ N/A

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)

WANDA SPEARS
STATE OF TENNESSEE NOTARY PUBLIC
WAYNE COUNTY
MY COMMISSION EXPIRES 11-26-2022

Sworn to and subscribed before me this 28th day of Dec. 2021.

Wanda Spears
Signature Notary Public

My Commission Expires 11-26-2021