

IN THE UNITED STATES SUPREME COURT

~~21-7500~~

ORIGINAL

WILLIAM CURTIS JONES, PRO SE
Petitioner

Action No. _____

FILED
FEB 28 2022OFFICE OF THE CLERK
SUPREME COURT, U.S.

v.

STATE OF TEXAS, ET. AL
*Defendant / Respondent***MOTION TO PROCEED IN FORMA PAUPERIS
*and AFFIDAVIT*****Affidavit in Support of the Application**

I am the petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write 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:

William Curtis Jones

Date:

January 10th, 2022

AO 239 (Rev. 12/13) Application to Proceed in United States Court Without Prepaying Fees or Costs (Long Form)

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 income amount during the past 12 months		Income amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0	\$	\$ 0	\$
Self-employment	\$	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child support	\$	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ 2009.00	\$	\$ 2009.00	\$
Disability (such as social security, insurance payments)	\$	\$	\$	\$
Unemployment payments	\$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	\$	\$	\$	\$
Total monthly income:	\$ 2,009.00	\$	\$ 2,009.00	\$

AO 239 (Rev. 12/13) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

2. List your 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
nla			\$
			\$

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
nla			\$
			\$
			\$

4. How much cash do you and your spouse have? \$

\$35.00 to \$75.00 average per month

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
BBVA Compass Bank	Checking	\$ 65.19	\$ nla
		\$	\$
		\$	\$

AO 239 (Rev. 12/13) Application to Proceed in United States Court Without Prepaying Fees or Costs (Long Form)

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because 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.

Assets owned by you or your spouse		
Home (Value)	\$	∅
Other real estate (Value)	\$	∅
Motor vehicle #1 (Value)	\$	∅
Make and year:		
Model:		
Registration #:		
Motor vehicle #2 (Value)	\$	∅
Make and year:		
Model:		
Registration #:		
Other assets (Value)	\$	∅
Other assets (Value)	\$	∅

AO 239 (Rev. 12/13) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

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
n/a	\$	\$
	\$	\$
	\$	\$

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

Name (or, if under 18, initials only)	Relationship	Age
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, semiannually, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (<i>including lot rented for mobile home</i>) Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	\$ 4,450.00	\$
Utilities (<i>electricity, heating fuel, water, sewer, and telephone</i>)	\$ 150.00	\$
Home maintenance (<i>repairs and upkeep</i>)	\$	\$
Food	\$ 425.00	\$
Clothing	\$ -0-	\$
Laundry and dry-cleaning	\$ 15.00	\$
Medical and dental expenses	\$	\$
Transportation (<i>not including motor vehicle payments</i>)	\$ 125.00	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (<i>not deducted from wages or included in mortgage payments</i>)		
Homeowner's or renter's:	\$ 38.00	\$
Life:	\$	\$
Health:	\$	\$
Motor vehicle:	\$	\$
Other:	\$ 300.00	\$
Taxes (<i>not deducted from wages or included in mortgage payments</i>) (<i>specify</i>):	\$ 0	\$
Installment payments		

AO 239 (Rev. 12/13) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

Motor vehicle:	\$	\$
Credit card (name):	\$	\$
Department store (name):	\$	\$
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses:	\$ 2,503 ⁰⁰	\$

** coverage supplemented by Family*

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months? **Possibly yes**

If yes, describe on an attached sheet. **I am having a difficult time to secure employment at this time since released from wrongful incarceration with profound felony convictions on my record for crimes that never occurred.**

10. Have you spent — or will you be spending — any money for expenses or attorney fees in conjunction with this lawsuit? **Unsure, unless COURT denies Petition to Appoint Attorney**

If yes, how much? \$_____

Provide any other information that will help explain why you cannot pay the costs of these proceedings.

I am having a difficult time to secure full-time employment at this time due to not fully recovered from COVID-19. Still experiencing severe breathing issues.

11. Identify the city and state of your legal residence. **Austin, Texas (Travis County)**

Your daytime phone number: **(737) 336-2225**

Your age: **63 years old**

Your years of schooling: **Post-graduate**

Last four digits of your social security number: **xxx-xx-6355**

8