

No. _____

**IN THE
SUPREME COURT OF THE UNITED STATES**

MALIK BREYON HOLLIS,

Petitioner,

v.

MATTHEW MAGNUSSON, Warden, Maine State Prison,

Respondent.

**On Petition for a Writ of Certiorari to
the United States Court of Appeals
For the First Circuit**

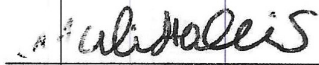
MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

Petitioner has previously been granted leave to proceed *in forma pauperis* in the Androscoggin County (Maine) Unified Criminal Court and the Maine Supreme Judicial Court, through the Maine Commission on Indigent Legal services, Title 4 Maine Revised Statutes section 1801 et seq. Pursuant to Rule 39.1, a copy of the most recent order appointing counsel is appended hereto.

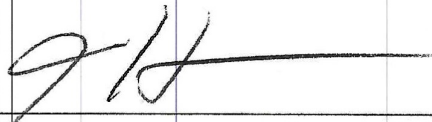
Petitioner's affidavit or declaration in support of this motion is attached hereto.

August 13, 2022



Malik Breyon Hollis

August 13, 2022



James P. Howaniec
Counsel of Record for Petitioner
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STATE OF MAINE

- ☐ UNIFIED CRIMINAL DOCKET
☐ SUPERIOR COURT
☐ DISTRICT COURT

STATE OF MAINE /

vs

Malik Hollis

Defendant/Juvenile

County: Androscoquin
 Location: Calais
 Docket No: 16-167

PRELIMINARY MOTION FOR
 ASSIGNMENT OF COUNSEL,
 AFFIDAVIT AND RELEASE

MOTION & AFFIDAVIT

The undersigned requests the Court to assign an attorney at public expense, based on the following accurate information.

Name of person whose financial information appears on this affidavit:

Mailing Address 81 Broad St Apt 3 Auburn Maine 04210Date of Birth 12-22-95 Home Phone _____ Cell Phone 891-81053 Work Phone _____

Income:

Salary and wages (gross pay) \$ _____ OR hourly wage \$ _____

AND numbers of hours worked _____ per ☐ week ☐ biweekly ☐ month ☐ other _____Source of income/employer is: ☐ Employer (name & address) _____☐ Unemployment ☐ Social Security ☐ TANF ☐ Alimony/child support ☐ Other _____If unemployed, last date employed 1/1/03 and last place of employment Sales Verizon

Assets:

☐ Cash bail I posted (1st party) in this or any other case \$ _____☒ Cash on hand \$ 20.00 ☒ Cash in the Bank \$ 0 ☐ Money owed to me \$ _____Property worth more than \$250 (include property owned alone or with any other person): ☐ House \$ _____ (amt. owed on house \$ _____)☐ Vehicle \$ _____ ☐ Stocks \$ _____ ☐ Recreational Vehicles \$ _____ (boat, ATV, snowmobile)☐ Other \$ _____

Expenses (Monthly):

☐ Mortgage \$ _____ ☐ Child Support \$ _____☐ Utilities \$ _____☐ Food \$ _____☐ Cable \$ _____ ☐ Credit Card \$ _____☐ Loans \$ _____☐ Heat \$ _____☐ Rent \$ _____ ☐ Cell Phone \$ _____☐ Other \$ _____☐ Other \$ _____

Check the following that apply

☐ I have _____ (number) children who ☐ live with me ☐ for whom I pay support of \$ _____ per _____I live ☐ alone ☐ with another who is my ☐ spouse ☐ friend ☐ parent(s) ☐ other: GF - Pamela (unsub)☐ That person shares my living expenses and contributes \$ all exp per ☐ week ☐ bi-weekly ☐ month ☐ other _____

I acknowledge that disclosure of my Social Security account number is mandatory under 36 M.R.S. §5276-A. My Social Security account number may be used to facilitate the collection of money that I may owe the State of Maine as a result of having had an attorney assigned to represent me if it is later determined that I am to be responsible for all or part of the attorney fees and costs.

SS Number Disclosure Required on separate form

The undersigned furnishes the above information to support the request for assignment of counsel. I have read the above form, I understand it, and the answers to the questions are true. I understand that any false answers on this form may subject me to criminal prosecution. I understand and agree that further investigation may be conducted, if necessary, to verify the information I have provided. I also understand that I have a continuing obligation, personally and through counsel, to report to the court and/or to the Maine Commission on Indigent Legal Services any changes in my employment or other financial circumstances.

Date: 10-24-16Recommendation: eligible

Subscribed and sworn to before me,

ORDER

☐ Motion Denied ☐ Applicant is not indigent ☐ There is no risk of jail☒ Motion Granted ☒ Attorney assigned to represent Defendant/Juvenile☐ Motion Granted: Applicant is partially indigent; and Applicant shall pay toward attorney's fees as follows:\$ _____ per ☐ week ☐ month ☐ biweekly ☐ other: _____ up to a total of \$ _____ starting _____☐ Maine Commission on Indigent Legal Services to determine rate of reimbursement.

ANY FIRST-PARTY BAIL MAY BE APPLIED TO OFFSET COUNSEL FEES AS SET OUT IN CR-006

Attorney J. Howard C. is assigned to represent Defendant/Juvenile.

This ORDER may be reviewed and revised at any time based on new or different information.

REFER TO SCREENER: YES _____ NO _____

Date: 10/27/16

CR-032, Rev. 07/15

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Signature of Applicant

Notary, Clerk, Attorney, Judge/Justice

Judge/Justice

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

I, Malik B. Hollis, 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>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>unmarried</u>
Self-employment	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Other (specify): <u>*</u>	\$ _____	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ <u>0</u>	\$ _____	\$ _____	\$ _____

* I AM UNEMPLOYED AND COUCH-SURFING, FRIENDS HELP ME WITH FOOD AND OTHER BASIC NECESSITIES. I RECEIVE MAINE CARE PUBLIC HEALTH INSURANCE.

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
Hannaford *	South Portland	July 2022	\$ 300 -
Distribution	Maine		\$
			\$

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			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 0
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
None	\$	\$
	\$	\$
	\$	\$

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 None	<input type="checkbox"/> Other real estate Value
<input type="checkbox"/> Motor Vehicle #1 Year, make & model None Value	<input type="checkbox"/> Motor Vehicle #2 Year, make & model Value
<input type="checkbox"/> Other assets Description None Value	

* I worked for 2 weeks last month
but lost my job due to lack of
transportation.

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>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

7. State the persons 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>NONE</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>	\$ _____
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>0</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ _____
Food	\$ <u>0</u>	\$ _____
Clothing	\$ <u>0</u>	\$ _____
Laundry and dry-cleaning	\$ <u>0</u>	\$ _____
Medical and dental expenses	\$ <u>0</u>	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$
Life	\$ 0	\$
Health	\$ 0	\$
Motor Vehicle	\$ 0	\$
Other: _____	\$ 0	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$
Installment payments		
Motor Vehicle	\$ 0	\$
Credit card(s)	\$ 0	\$
Department store(s)	\$ 0	\$
Other: _____	\$ 0	\$
Alimony, maintenance, and support paid to others	\$ 0	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$
Other (specify): _____	\$ 0	\$
Total monthly expenses:	\$ 0	\$

9. Do you expect any major changes 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? _____

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

my attorney, JAMES HOWANICE, WAS ORIGINALLY COURT Appointed to represent me in Maine AT STATE EXPENSE BECAUSE I WAS DETERMINED indigent. ALL legal work performed in Federal Courts, including this Appeal, Have BEEN pro BONO.

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:

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

I served 3 years in the Maine State Prison as a result of the conviction I am appealing to this court. This has made it difficult to obtain employment since my release. I have been relying on help from friends for food,

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

Executed on: August 13, 2022

Malik Hollis

(Signature)

Malik Breyon Hollis