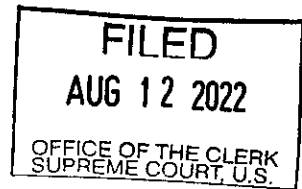


22-5443
No. _____

ORIGINAL



IN THE
SUPREME COURT OF THE UNITED STATES

Robert L. Davis — PETITIONER
(Your Name)

VS.

Ashley Moody et al. — RESPONDENT(S)

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:

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

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

☒ 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.

Robert L. Davis
(Signature)

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

I, Robert L. Davis, 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>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>None</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

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
Not Applicable		N/A	\$ 0
			\$ 0
			\$ 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
Not Applicable		N/A	\$ 0
			\$ 0
			\$ 0

4. How much cash do you and your spouse have? \$
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
NOT Applicable	\$ 0	\$ 0
	\$ 0	\$ 0
	\$ 0	\$ 0

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

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

Not Applicable

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

\$ 0

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

Not Applicable

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)

\$ 0

\$ 0

Are real estate taxes included? ☐ Yes ☐ No

Is property insurance included? ☐ Yes ☐ No

Utilities (electricity, heating fuel,
water, sewer, and telephone)

\$ 0

\$ 0

Home maintenance (repairs and upkeep)

\$ 0

\$ 0

Food

\$ 0

\$ 0

Clothing

\$ 0

\$ 0

Laundry and dry-cleaning

\$ 0

\$ 0

Medical and dental expenses

\$ 5.00

\$ 0

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>0</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>
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Other: <u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>No NE</u>	\$ <u>0</u>	\$ <u>0</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit card(s)	\$ <u>0</u>	\$ <u>0</u>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: <u>No NE</u>	\$ <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>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly expenses:	\$ <u>0</u>	\$ <u>0</u>

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? 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? N/A

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.

Incarcerated the last 4-years in a state that does not pay inmates for work assignments

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

Executed on: August 14th, 2022

Robert L. Davis
(Signature)

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FACILITY: 119 - SANTA ROSA C.I.
FOR: 07/01/2022 - 07/31/2022

IBSR140 (74)

ACCT NAME: DAVIS, ROBERT L.
BED: C3109L
PO BOX:

ACCT#: 652400
TYPE: INMATE TRUST

BEGINNING BALANCE 07/01/22 \$0.00

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/-	AMOUNT	BALANCE
07/11/22	205	LEGAL POSTAGE W LIEN CREATED	W 2022062001 - 07/11/2022	000	2022062001	-	\$0.00	\$0.00
07/11/22	205	LEGAL POSTAGE W LIEN CREATED	W 2022062002 - 07/11/2022	000	2022062002	-	\$0.00	\$0.00
07/11/22	205	LEGAL POSTAGE W LIEN CREATED	W 2022062003 - 07/11/2022	000	2022062003	-	\$0.00	\$0.00
07/11/22	205	LEGAL POSTAGE W LIEN CREATED	W 2022062401 - 07/11/2022	000	2022062401	-	\$0.00	\$0.00
07/11/22	205	LEGAL POSTAGE W LIEN CREATED	W 2022062402 - 07/11/2022	000	2022062402	-	\$0.00	\$0.00
07/15/22	119	LEGAL POSTAGE W LIEN CREATED	W 2022070601 - 07/15/2022	000	2022070601	-	\$0.00	\$0.00
07/15/22	119	LEGAL POSTAGE W LIEN CREATED	W 2022070602 - 07/15/2022	000	2022070602	-	\$0.00	\$0.00
07/15/22	119	LEGAL POSTAGE W LIEN CREATED	W 2022070603 - 07/15/2022	000	2022070603	-	\$0.00	\$0.00
07/15/22	119	LEGAL POSTAGE W LIEN CREATED	W 2022070701 - 07/15/2022	000	2022070701	-	\$0.00	\$0.00
07/15/22	119	LEGAL POSTAGE W LIEN CREATED	W 2022070702 - 07/15/2022	000	2022070702	-	\$0.00	\$0.00
07/15/22	119	LEGAL POSTAGE W LIEN CREATED	W 2022070703 - 07/15/2022	000	2022070703	-	\$0.00	\$0.00
07/18/22	204	LEGAL POSTAGE W LIEN CREATED	W 2022071401 - 07/18/2022	000	2022071401	-	\$0.00	\$0.00
07/29/22	140	LEGAL POSTAGE W LIEN CREATED	W 2022072901 - 07/29/2022	000	2022072901	-	\$0.00	\$0.00
07/29/22	140	LEGAL POSTAGE W LIEN CREATED	W 2022072902 - 07/29/2022	000	2022072902	-	\$0.00	\$0.00
07/29/22	140	LEGAL POSTAGE W LIEN CREATED	W 2022072903 - 07/29/2022	000	2022072903	-	\$0.00	\$0.00
07/29/22	140	LEGAL POSTAGE W LIEN CREATED	W 2022072904 - 07/29/2022	000	2022072904	-	\$0.00	\$0.00

ENDING BALANCE 07/31/22 \$0.00

LIEN DATE	TYPE OF LIEN	LIEN FACL	AMOUNT OF LIEN	AMOUNT STILL OWED
SUMMARY	LEGAL POSTAGE		\$262.59	\$262.59

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FACILITY: 119 - SANTA ROSA C.I.
FOR: 07/01/2022 - 07/31/2022

IBSR140 (74)

ACCT NAME: DAVIS, ROBERT L. ACCT#: 652400
BED: C3109L TYPE: INMATE TRUST
PO BOX:

LIEN DATE	TYPE OF LIEN	LIEN FACL	AMOUNT OF LIEN	AMOUNT STILL OWED
SUMMARY	LEGAL COPIES		\$256.80	\$256.80
SUMMARY	MEDICAL CO-PAYMENT		\$185.00	\$185.00
SUMMARY	FEDERAL PRISON LITIGATION		\$1,700.00	\$1,646.93
07/11/22	LEGAL POSTAGE	000	\$2.56	\$2.56
07/11/22	LEGAL POSTAGE	000	\$0.53	\$0.53
07/11/22	LEGAL POSTAGE	000	\$1.76	\$1.76
07/11/22	LEGAL POSTAGE	000	\$0.73	\$0.73
07/11/22	LEGAL POSTAGE	000	\$0.53	\$0.53
07/15/22	LEGAL POSTAGE	000	\$0.53	\$0.53
07/15/22	LEGAL POSTAGE	000	\$1.76	\$1.76
07/15/22	LEGAL POSTAGE	000	\$2.36	\$2.36
07/15/22	LEGAL POSTAGE	000	\$1.96	\$1.96
07/15/22	LEGAL POSTAGE	000	\$0.53	\$0.53
07/15/22	LEGAL POSTAGE	000	\$0.53	\$0.53
07/18/22	LEGAL POSTAGE	000	\$0.81	\$0.81
07/29/22	LEGAL POSTAGE	000	\$0.57	\$0.57
07/29/22	LEGAL POSTAGE	000	\$0.57	\$0.57
07/29/22	LEGAL POSTAGE	000	\$0.57	\$0.57
07/29/22	LEGAL POSTAGE	000	\$0.57	\$0.57