

Case No. **22-5448**

IN THE SUPREME COURT OF THE UNITED STATES
October Term, *Anno Domini* 2021

ROGER C. CASSIDY,

Petitioner,

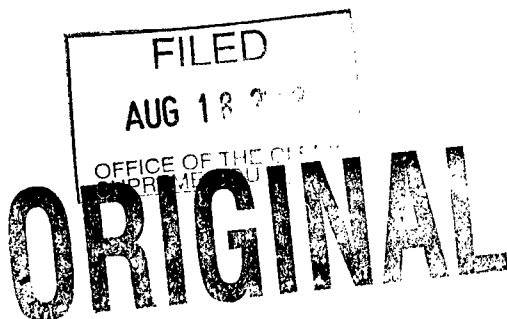
versus

STATE OF FLORIDA,

Respondent.

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The Petitioner, Roger C. Cassidy, in proper person, respectfully moves this Court for leave to file the attached *pro se* petition for writ of *certiorari* without prepayment of costs and to proceed *in forma pauperis*. Petitioner Cassidy's affidavit or declaration in support of this motion is attached hereto.



Roger C. Cassidy
ROGER C. CASSIDY #978936
Tomoka Correctional Institution
3950 Tiger Bay Road
Daytona Beach, Florida 32124

Petitioner in proper person

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

I, Roger C. Cassidy 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 thereof; 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 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>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Self-employment	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Gifts	\$ <u>150.00</u>	\$ <u>N/A</u>	\$ <u>150.00</u>	\$ <u>N/A</u>
Alimony	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Child Support	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>150.00</u>	\$ <u>N/A</u>	\$ <u>150.00</u>	\$ <u>N/A</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
N/A*	N/A	N/A	N/A
N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A

* I have been incarcerated since 7/12/2001.

3. List your spouse's 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
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? \$ 0

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
N/A	N/A	\$ N/A	\$ N/A
N/A	N/A	\$ N/A	\$ N/A
N/A	N/A	\$ N/A	\$ 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 _____

☐ Motor Vehicle #2
Year, make & model N/A
Value _____

☐ Other assets
Description N/A
Value _____

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
N/A
N/A

\$ N/A
\$ N/A
\$ N/A

\$ N/A
\$ N/A
\$ N/A

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

Name

Relationship

Age

N/A
N/A
N/A

N/A
N/A
N/A

N/A
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.

Rent or home-mortgage payment
(include lot rented for mobile home)

You

Your Spouse

\$ 0 \$ N/A

Are real estate taxes included?

☐ Yes ☐ No

Is property insurance included?

☐ Yes ☐ No

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

\$ 0 \$ N/A

Home maintenance (repairs and upkeep)

\$ 0 \$ N/A

Food

\$ 100.00-150.00 \$ N/A

Clothing

\$ 0-50.00 \$ N/A

Laundry and dry-cleaning

\$ 0 \$ N/A

Medical and dental expenses

\$ 0-10.00 \$ 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:					
Taxes (not deducted from wages or included in mortgage payments)					
(specify):		\$	0	\$	N/A
Installment payments					
Motor Vehicle		\$	0	\$	N/A
Credit card(s)		\$	0	\$	N/A
Department store(s)		\$	0	\$	N/A
Other:					
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):		\$	0	\$	N/A
Total monthly expenses		\$	150.00	\$	N/A

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:

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.

The small amount of money I receive are gifts from family that allows me to purchase necessities like hygiene products, over-the-counter medications, and snacks.

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

Executed on: August 18th, 2022.

Roger C. Cassidy
(Signature)