

22-5492  
No. \_\_\_\_\_

ORIGINAL

Supreme Court, U.S.  
FILED

AUG 15 2022

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

William Wallace — PETITIONER  
(Your Name)

VS.  
Florida commission on  
offender review — 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.

William Wallace

(Signature)

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

I, William Wallace, 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.

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
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>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<b>Total monthly income:</b>	\$ <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.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
NA	NA	NA	\$ NA
NA	NA	NA	\$ NA
NA	NA	NA	\$ NA

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.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
NA	NA	NA	\$ NA
NA	NA	NA	\$ NA
NA	NA	NA	\$ NA

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

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

<b>Type of account (e.g., checking or savings)</b>	<b>Amount you have</b>	<b>Amount your spouse has</b>
NA	\$ NA	\$ NA
NA	\$ NA	\$ NA
NA	\$ NA	\$ NA

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home  
Value NA

Other real estate  
Value NA

Motor Vehicle #1  
Year, make & model NA  
Value NA

Motor Vehicle #2  
Year, make & model NA  
Value NA

Other assets  
Description NA  
Value NA

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
NA	\$ NA	\$ NA
NA	\$ NA	\$ NA
NA	\$ NA	\$ NA

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
NA	NA	NA
NA	NA	NA
NA	NA	NA

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)	\$ NA	\$ NA
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)	\$ NA	\$ NA
Home maintenance (repairs and upkeep)	\$ NA	\$ NA
Food	\$ NA	\$ NA
Clothing	\$ NA	\$ NA
Laundry and dry-cleaning	\$ NA	\$ NA
Medical and dental expenses	\$ NA	\$ NA

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

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? NA

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

Executed on: August, 2022

William Wallace  
(Signature)

ACCT NAME: WALLACE, WILLIAM J.  
 BED: B1110U  
 PO BOX:

FLORIDA DEPARTMENT OF CORRECTIONS  
 TRUST FUND ACCOUNT STATEMENT  
 FOR: 12/01/2021 - 06/01/2022

ACCT#: 683889  
 TYPE: INMATE TRUST

06/06/22  
 10:26:42  
 PAGE 1

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	BEGINNING BALANCE 12/01/21	\$1,287.88	
						+/-	AMOUNT	BALANCE
12/01/21	083	CANTEEN SALES	43020211130	000		-	\$5.00	\$1,282.88
12/05/21	083	CANTEEN SALES	43020211204	000		-	\$18.28	\$1,264.60
12/06/21	175	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.98	\$1,263.62
12/07/21	083	CANTEEN SALES	43020211206	000		-	\$57.43	\$1,206.19
12/11/21	083	CANTEEN SALES	43020211210	000		-	\$29.64	\$1,176.55
12/13/21	083	CANTEEN SALES	43020211212	000		-	\$8.96	\$1,167.59
12/14/21	083	CANTEEN SALES	43020211213	000		-	\$0.96	\$1,166.63
12/15/21	079	CANTEEN SALES	43020211214	000		-	\$35.91	\$1,130.72
12/18/21	083	CANTEEN SALES	43020211217	000		-	\$47.26	\$1,083.46
12/19/21	083	CANTEEN SALES	43020211218	000		-	\$11.78	\$1,071.68
12/20/21	175	PROCESSING FEE	WEEKLY DRAW	000		-	\$3.99	\$1,067.69
12/22/21	083	CANTEEN SALES	43020211221	000		-	\$0.99	\$1,066.70
12/24/21	083	CANTEEN SALES	43020211223	000		-	\$74.94	\$991.76
12/26/21	081	CANTEEN SALES	43020211225	000		-	\$18.56	\$973.20
12/27/21	177	PROCESSING FEE	WEEKLY DRAW	000		-	\$5.28	\$967.92
12/28/21	083	CANTEEN SALES	43020211227	000		-	\$0.99	\$966.93
12/31/21	083	CANTEEN SALES	43020211230	000		-	\$87.10	\$879.83
01/02/22	083	CANTEEN SALES	43020220101	000		-	\$10.77	\$869.06
01/03/22	177	PROCESSING FEE	WEEKLY DRAW	000		-	\$1.56	\$867.50
01/04/22	083	CANTEEN SALES	43020220103	000		-	\$0.99	\$866.51
01/05/22	081	CANTEEN SALES	43020220104	000		-	\$62.85	\$803.66
01/08/22	081	CANTEEN SALES	43020220107	000		-	\$17.66	\$786.00
01/10/22	171	PROCESSING FEE	WEEKLY DRAW	000		-	\$4.08	\$781.92
01/11/22	083	CANTEEN SALES	43020220110	000		-	\$0.85	\$781.07
01/15/22	081	CANTEEN SALES	43020220114	000		-	\$66.85	\$714.22
01/16/22	113	JPAY MEDIA W/D	000121339916	000		-	\$30.00	\$684.22
01/17/22	165	PROCESSING FEE	WEEKLY DRAW	000		-	\$8.00	\$676.22
01/18/22	081	CANTEEN SALES	43020220117	000		-	\$0.97	\$675.25
01/22/22	083	CANTEEN SALES	43020220121	000		-	\$45.92	\$629.33
01/23/22	083	CANTEEN SALES	43020220122	000		-	\$22.48	\$606.85
01/24/22	169	PROCESSING FEE	WEEKLY DRAW	000		-	\$23.70	\$583.15
01/26/22	083	CANTEEN SALES	43020220125	000		-	\$0.92	\$582.23
01/29/22	083	CANTEEN SALES	43020220128	000		-	\$48.10	\$534.13
01/30/22	083	CANTEEN SALES	43020220129	000		-	\$41.58	\$492.55
01/31/22	171	PROCESSING FEE	WEEKLY DRAW	000		-	\$7.48	\$485.07
02/03/22	083	CANTEEN SALES	43020220202	000		-	\$0.97	\$484.10
02/05/22	081	CANTEEN SALES	43020220204	000		-	\$50.38	\$433.72
02/07/22	077	CANTEEN SALES	43020220206	000		-	\$18.59	\$415.13
02/07/22	169	PROCESSING FEE	WEEKLY DRAW	000		-	\$23.13	\$392.00
02/08/22	083	CANTEEN SALES	43020220207	000		-	\$0.92	\$391.08
02/13/22	083	CANTEEN SALES	43020220212	000		-	\$38.45	\$352.63
02/14/22	083	CANTEEN SALES	43020220213	000		-	\$9.18	\$343.45
						-	\$31.57	\$311.88

IBSR140 (74)

FLORIDA DEPARTMENT OF CORRECTIONS  
 TRUST FUND ACCOUNT STATEMENT  
 FOR: 12/01/2021 - 06/01/2022

06/06/22  
 10:26:42  
 PAGE 2

ACCT NAME: WALLACE, WILLIAM J.  
 BED: B1110U  
 PO BOX:

ACCT#: 683889  
 TYPE: INMATE TRUST

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/-	AMOUNT	BALANCE
02/14/22	177	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.79	\$311.09
02/21/22	081	CANTEEN SALES	43020220220	000		-	\$28.91	\$282.18
02/21/22	171	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.29	\$281.89
02/24/22	083	CANTEEN SALES	43020220223	000		-	\$23.91	\$257.98
02/27/22	083	CANTEEN SALES	43020220226	000		-	\$28.63	\$229.35
02/28/22	173	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.53	\$228.82
03/07/22	083	CANTEEN SALES	43020220306	000		-	\$48.07	\$180.75
03/07/22	175	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.48	\$180.27
03/09/22	083	CANTEEN SALES	43020220308	000		-	\$15.10	\$165.17
03/11/22	081	CANTEEN SALES	43020220310	000		-	\$1.10	\$164.07
03/12/22	081	CANTEEN SALES	43020220311	000		-	\$54.93	\$109.14
03/14/22	177	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.71	\$108.43
03/17/22	081	CANTEEN SALES	43020220316	000		-	\$48.16	\$60.27
03/19/22	083	CANTEEN SALES	43020220318	000		-	\$12.05	\$48.22
03/20/22	083	CANTEEN SALES	43020220319	000		-	\$14.03	\$34.19
03/21/22	175	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.74	\$33.45
03/24/22	083	CANTEEN SALES	43020220323	000		-	\$21.99	\$11.46
03/28/22	175	PROCESSING FEE	WEEKLY DRAW	000		-	\$0.22	\$11.24
03/31/22	083	CANTEEN SALES	43020220330	000		-	\$11.14	\$0.10
04/04/22	175	LIEN PAYMENT	WEEKLY DRAW	000		-	\$0.10	\$0.00
		PROCESSING FEE	- 04/04/2022	20220404				
05/13/22	153	LEGAL POSTAGE W	2022050301	000		-	\$0.00	\$0.00
		LIEN CREATED	- 05/13/2022	2022050301				

ENDING BALANCE 06/01/22 \$0.00

LIEN DATE	TYPE OF LIEN	LIEN FACL	AMOUNT OF LIEN	AMOUNT STILL OWED
04/04/22	PROCESSING FEE	000	\$0.11	\$0.01
05/13/22	LEGAL POSTAGE	000	\$0.53	\$0.53

IBSR140 (74)

FLORIDA DEPARTMENT OF CORRECTIONS  
 TRUST FUND ACCOUNT STATEMENT  
 FACILITY: 430 - MARTIN C.I.  
 FOR: 07/01/2022 - 07/31/2022

08/10/22  
 09:22:25  
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ACCT NAME: WALLACE, WILLIAM J.  
 BED: B1110U  
 PO BOX:

ACCT#: 683889  
 TYPE: INMATE TRUST

							BEGINNING BALANCE 07/01/22	\$0.00
POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/-	AMOUNT	BALANCE
07/15/22	110	LEGAL POSTAGE W	2022062701	000		-	\$0.00	\$0.00
		LIEN CREATED	- 07/15/2022	2022062701		-	\$0.00	\$0.00
07/22/22	189	LEGAL POSTAGE W	2022071901	000		-	\$0.00	\$0.00
		LIEN CREATED	- 07/22/2022	2022071901		-	\$0.00	\$0.00

LIEN DATE	TYPE OF LIEN	LIEN FACL	AMOUNT OF LIEN	AMOUNT STILL OWED	ENDING BALANCE 07/31/22	\$0.00
SUMMARY	MEDICAL CO-PAYMENT		\$5.00	\$5.00		
SUMMARY	PROCESSING FEE		\$0.11	\$0.01		
SUMMARY	LEGAL POSTAGE		\$6.85	\$6.85		
07/15/22	LEGAL POSTAGE	000	\$0.53	\$0.53		
07/22/22	LEGAL POSTAGE	000	\$0.73	\$0.73		