

22-5495

No. _____

ORIGINAL

Supreme Court, U.S.
FILED

AUG 18 2022

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

Micquel Thomas — PETITIONER
(Your Name)

VS.

Allison L. Freed — 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):

Michigan Court of Appeals and Michigan Supreme Court

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.

Micquel Thomas
(Signature)

RECEIVED

AUG 24 2022

OFFICE OF THE CLERK
SUPREME COURT, U.S.

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

I, Micquel Thomas, 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>Yes</u> | \$ _____ | \$ <u>25.00</u> | \$ _____ |
| Self-employment | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Income from real property (such as rental income) | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Interest and dividends | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Gifts | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Alimony | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Child Support | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Retirement (such as social security, pensions, annuities, insurance) | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Disability (such as social security, insurance payments) | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Unemployment payments | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Public-assistance (such as welfare) | \$ <u>W O</u> | \$ _____ | \$ _____ | \$ _____ |
| Other (specify): _____ | \$ <u>Nothing</u> | \$ _____ | \$ _____ | \$ _____ |
| Total monthly income: | \$ <u>25.00</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 |
|--------------------|---|---------------------|-------------------|
| <u>MDOC porter</u> | <u>JCF Facility 3500 N. Elm Rd Jackson MI 49201</u> | <u>2020</u> | <u>\$ 25.00</u> |
| | | | <u>\$</u> |
| | | | <u>\$</u> |

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 |
|-------------|-------------|---------------------|-------------------|
| <u>NONE</u> | <u>NONE</u> | <u>NONE</u> | <u>\$ NONE</u> |
| | | | <u>\$</u> |
| | | | <u>\$</u> |

4. How much cash do you and your spouse have? \$ NONE
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 |
|---|-----------------|------------------------|
| <u>NONE</u> | <u>\$ NONE</u> | <u>\$ NONE</u> |
| | <u>\$</u> | <u>\$</u> |
| | <u>\$</u> | <u>\$</u> |

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

Home
Value NONE

Other real estate
Value NONE

Motor Vehicle #1
Year, make & model NONE
Value _____

Motor Vehicle #2
Year, make & model NONE
Value _____

Other assets
Description NONE
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 |
|---------------------------------------|--------------------|----------------------------|
| <u>NONE</u> | \$ <u>NONE</u> | \$ <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> | <u>NONE</u> | <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>NONE</u> | \$ <u>NONE</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>NONE</u> | \$ <u>NONE</u> |
| Home maintenance (repairs and upkeep) | \$ <u>NONE</u> | \$ <u>NONE</u> |
| Food | \$ <u>NONE</u> | \$ <u>NONE</u> |
| Clothing | \$ <u>NONE</u> | \$ <u>NONE</u> |
| Laundry and dry-cleaning | \$ <u>NONE</u> | \$ <u>NONE</u> |
| Medical and dental expenses | \$ <u>NONE</u> | \$ <u>NONE</u> |

| | You | Your spouse |
|---|----------------|----------------|
| Transportation (not including motor vehicle payments) | \$ <u>None</u> | \$ <u>None</u> |
| Recreation, entertainment, newspapers, magazines, etc. | \$ <u>None</u> | \$ <u>None</u> |
| Insurance (not deducted from wages or included in mortgage payments) | | |
| Homeowner's or renter's | \$ <u>None</u> | \$ <u>None</u> |
| Life | \$ <u>None</u> | \$ <u>None</u> |
| Health | \$ <u>None</u> | \$ <u>None</u> |
| Motor Vehicle | \$ <u>None</u> | \$ <u>None</u> |
| Other: _____ | \$ <u>None</u> | \$ <u>None</u> |
| Taxes (not deducted from wages or included in mortgage payments) | | |
| (specify): _____ | \$ <u>None</u> | \$ <u>None</u> |
| Installment payments | | |
| Motor Vehicle | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Credit card(s) | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Department store(s) | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Other: _____ | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Alimony, maintenance, and support paid to others | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Regular expenses for operation of business, profession, or farm (attach detailed statement) | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Other (specify): _____ | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Total monthly expenses: | \$ <u>N/A</u> | \$ <u>N/A</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? _____

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.

I am indigent an have no outside support
an 25.00 dollar a month doesnt allow me to
pay the cost to file my case before this Honorable
Court.

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

Executed on: August 17th, 2022

Mugger D Thomas
(Signature)

STATE OF MICHIGAN

CERTIFICATE OF PRISONER ACCOUNT ACTIVITY
AND AFFIDAVIT REGARDING SUSPENSION OF PRISONER FEES/COSTS

Prisoner-Plaintiff/Petitioner/Appellant name and number
Micquel Thomas 636589

Defendant's/Respondent's/Appellee's name
Allison L. Freed

v

CERTIFICATE OF PRISONER ACCOUNT ACTIVITY

I am employed by the Michigan Department of Corrections at the facility identified below, at which the prisoner identified as the Plaintiff/Petitioner/Appellant is currently incarcerated.

Attached is a computer printout which accurately reflects the current spendable balance and all activity within this prisoner's account during the preceding twelve months or, if the prisoner has been incarcerated for less than twelve months, for the period of incarceration. Code "C" on the printout represents a withdrawal from the account and code "D" represents a deposit to the account. The attached printout reflects, for the reported period, an average monthly account deposit (i.e., total deposits divided by number of months) of \$57.82 and an average monthly account balance (i.e., total deposits minus total withdrawals divided by number of months) of \$4.14. There is a current spendable account balance of \$25.20.

Date: 08/08/2021



/ -- CRM

Signature
G Robert Cotton
Correctional Facility

/ Title

Note: Bottom section to be completed by prisoner and sent by prisoner to a Michigan court along with State civil pleading/claim of appeal.

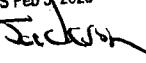
AFFIDAVIT REGARDING SUSPENSION OF PRISONER FEES/COSTS

1. I am the Plaintiff/Respondent/Appellant in the attached pleading/petition/claim of appeal.
2. I am asking the court for suspension of filing fees and costs because I am indigent as reflected in the Certificate of Prisoner Account Activity and attached computer print-out.



Prisoner's Signature

Subscribed and sworn to before me, a Notary Public,
this 17 day of August, 2022.

JOHN CULLIVER
NOTARY PUBLIC, STATE OF MI
COUNTY OF INGHAM
MY COMMISSION EXPIRES Feb 5, 2025
THE COUNTY OF 

My Commission Expires: 02/05/2025

CSJ-276 7/07

Daily Transaction Summary: August 08, 2021 - August 08, 2022

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Offender Information

| | | | | |
|---|-----------------------|----------------|--------------------|----------|
| Offender Number: 0636589 | Institution: JCF | Living Unit: E | Primary Balance: | \$167.24 |
| Offender Name: Thomas, Micquel Shemario | Housing Facility: JCF | Cell: 91 | Available Balance: | \$25.20 |
| Account Status: Open | Tier: U | Bed: Top | | |

Primary Trust Transactions

| Date | Transaction Type | Payer / Paid To | Voucher Number | Deposit | Expense | Balance | Loc Code |
|------------------------|----------------------------|------------------------------|--------------------|---------|-----------|----------|----------|
| 08/08/2021 | | | | | | \$117.51 | |
| 08/13/2021 06:55:12 AM | JCF-Institutional Services | 500 - Institutional Services | | \$31.92 | | \$149.43 | JCF |
| 08/19/2021 01:31:17 AM | Commissary Sale | Keefe Commissary | C104023583 | | (\$49.31) | \$100.12 | JCF |
| 08/25/2021 01:31:03 AM | Commissary Sale | Keefe Commissary | C104023583 | | \$3.00 | \$103.12 | JCF |
| 09/07/2021 07:40:07 PM | Kiosk Request | JPay Inc. | | | (\$5.00) | \$98.12 | COF |
| 09/08/2021 05:10:09 AM | GTL | Joyce Thomas | | \$50.00 | | \$148.12 | COF |
| 09/15/2021 02:00:13 PM | JCF-Institutional Services | 500 - Institutional Services | | \$35.28 | | \$183.40 | JCF |
| 09/16/2021 01:31:27 AM | Commissary Sale | Keefe Commissary | C104069741 | | (\$51.43) | \$131.97 | JCF |
| 09/23/2021 03:33:47 PM | Mike's Better Shoes Disb. | Mikes Better Shoes | JCF MBS shoes | | (\$89.02) | \$42.95 | JCF |
| 10/01/2021 11:46:57 AM | Legal Stamps | JCF Institutional Services | | | (\$0.53) | \$42.42 | JCF |
| 10/01/2021 11:47:51 AM | Legal Stamps | JCF Institutional Services | | | (\$0.53) | \$41.89 | JCF |
| 10/03/2021 07:40:12 PM | Kiosk Request | JPay Inc. | | | (\$5.00) | \$36.89 | COF |
| 10/05/2021 05:10:08 AM | GTL | Michala Carter | | \$47.00 | | \$83.89 | COF |
| 10/14/2021 08:53:33 AM | JCF-Institutional Services | 500 - Institutional Services | | \$35.28 | | \$119.17 | JCF |
| 10/25/2021 03:06:54 PM | JL Marcus Disbursement | Jack L Marcus | socks,shirt,briefs | | (\$47.44) | \$71.73 | JCF |
| 11/06/2021 07:40:07 PM | Kiosk Request | JPay Inc. | | | (\$4.17) | \$67.56 | COF |
| 11/15/2021 05:10:08 AM | GTL | Michala Carter | | \$46.00 | | \$113.56 | COF |
| 11/15/2021 05:10:08 AM | GTL | Michala Carter | | \$5.00 | | \$118.56 | COF |
| 11/15/2021 11:04:34 AM | JCF-Institutional Services | 500 - Institutional Services | | \$36.12 | | \$154.68 | JCF |
| 11/18/2021 07:40:12 PM | Kiosk Request | JPay Inc. | | | (\$4.81) | \$149.87 | COF |
| 11/25/2021 01:30:57 AM | Commissary Sale | Keefe Commissary | C104189176 | | (\$10.44) | \$139.43 | JCF |
| 12/09/2021 01:31:27 AM | Commissary Sale | Keefe Commissary | C104208117 | | (\$26.51) | \$112.92 | JCF |
| 12/14/2021 06:42:53 AM | JCF-Institutional Services | 500 - Institutional Services | | \$32.76 | | \$145.68 | JCF |
| 12/16/2021 01:36:28 AM | Commissary Sale | Keefe Commissary | C104208117 | | \$1.40 | \$147.08 | JCF |
| 01/05/2022 08:43:50 AM | Dental Co-Pay Disbursement | Health Care Co-Pay | DEN JCF DOS 120921 | | (\$5.00) | \$142.08 | JCF |
| 01/06/2022 01:31:09 AM | Commissary Sale | Keefe Commissary | C104252977 | | (\$33.03) | \$109.05 | JCF |
| 01/14/2022 09:47:31 AM | JCF-Institutional Services | 500 - Institutional Services | | \$34.44 | | \$143.49 | JCF |
| 01/20/2022 01:31:20 AM | Commissary Sale | Keefe Commissary | C104276014 | | (\$18.00) | \$125.49 | JCF |
| 02/03/2022 01:31:18 AM | Commissary Sale | Keefe Commissary | C104296954 | | (\$19.98) | \$105.51 | JCF |
| 02/14/2022 08:37:59 AM | JCF-Institutional Services | 500 - Institutional Services | | \$33.60 | | \$139.11 | JCF |
| 02/21/2022 07:40:08 PM | Kiosk Request | JPay Inc. | | | (\$5.00) | \$134.11 | COF |

Daily Transaction Summary (0636589 - Micquel Thomas cont.): August 08, 2021 - August 08, 2022

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| Primary Trust Transactions | | | | | | | |
|----------------------------|-----------------------------|------------------------------|----------------------|---------|-----------|------------|----------|
| Date | Transaction Type | Payer / Paid To | Voucher Number | Deposit | Expense | Balance | Loc Code |
| 03/02/2022 05:10:14 AM | GTL | Michala Carter | | \$50.00 | | \$184.11 | COF |
| 03/03/2022 01:31:18 AM | Commissary Sale | Keefe Commissary | C104342265 | | (\$14.00) | \$170.11 | JCF |
| 03/03/2022 07:40:09 PM | Kiosk Request | JPay Inc. | | | (\$42.39) | \$127.72 | COF |
| 03/14/2022 07:10:35 AM | JCF-Institutional Services | 500 - Institutional Services | | | \$31.92 | \$159.64 | JCF |
| 03/23/2022 07:40:09 PM | Kiosk Request | JPay Inc. | | | (\$5.00) | \$154.64 | COF |
| 04/02/2022 05:10:14 AM | GTL | Michala Carter | | \$50.00 | | \$204.64 | COF |
| 04/04/2022 08:33:56 AM | Regular Copies Disbursement | JCF PBF Copies | REG CPY JCF 04.03.22 | | (\$1.20) | \$203.44 | JCF |
| 04/06/2022 11:54:28 AM | Legal Stamps | JCF Institutional Services | | | (\$0.73) | \$202.71 | JCF |
| 04/06/2022 11:55:16 AM | Legal Stamps | JCF Institutional Services | | | (\$0.73) | \$201.98 | JCF |
| 04/07/2022 07:40:07 PM | Kiosk Request | JPay Inc. | | | (\$2.00) | \$199.98 | COF |
| 04/15/2022 10:05:37 AM | JCF-Institutional Services | 500 - Institutional Services | | \$4.20 | | \$204.18 | JCF |
| 04/18/2022 08:05:08 AM | Union Supply Disbursement | Union Supply | shirt,sandal,briefs | | (\$62.20) | \$141.98 | JCF |
| 04/22/2022 07:40:08 PM | Kiosk Request | JPay Inc. | | | (\$1.18) | \$140.80 | COF |
| 05/13/2022 09:11:23 AM | JCF-Institutional Services | 500 - Institutional Services | | | \$25.20 | \$166.00 | JCF |
| 05/14/2022 07:40:11 PM | Kiosk Request | JPay Inc. | | | (\$4.86) | \$161.14 | COF |
| 05/21/2022 05:10:09 AM | GTL | Michala Carter | | \$25.00 | | \$186.14 | COF |
| 06/01/2022 09:34:15 AM | Vendor Refund | Union Supply Group | | \$18.89 | | \$205.03 | COF |
| 06/08/2022 03:35:00 PM | Regular Copies Disbursement | JCF PBF Copies | REG CPY 060822 | | (\$0.90) | \$204.13 | JCF |
| 06/14/2022 03:09:10 PM | JCF-Institutional Services | 500 - Institutional Services | | | \$26.04 | \$230.17 | JCF |
| 06/16/2022 08:24:41 AM | MSI Shorts Disbursement | MSI Shorts - 1242 | JCF MSI Shorts - 124 | | (\$23.32) | \$206.85 | JCF |
| 06/18/2022 05:10:09 AM | GTL | Dekpough Akaazua | | \$25.00 | | \$231.85 | COF |
| 07/01/2022 11:19:26 AM | Access Catalog Disbursement | Access Catalog | | | (\$83.28) | \$148.57 | JCF |
| 07/02/2022 07:40:07 PM | Kiosk Request | JPay Inc. | | | (\$5.00) | \$143.57 | COF |
| 07/03/2022 07:40:09 PM | Kiosk Request | JPay Inc. | | | (\$1.53) | \$142.04 | COF |
| 07/15/2022 08:12:05 AM | JCF-Institutional Services | 500 - Institutional Services | | | \$25.20 | \$167.24 | JCF |
| 07/21/2022 07:40:12 PM | Kiosk Request | JPay Inc. | | | (\$25.00) | \$142.24 | COF |
| 08/04/2022 12:03:42 PM | Regular Copies Disbursement | JCF PBF Copies | reg cpy NSF \$1.00 | | \$0.00 | \$142.24 | JCF |
| 08/07/2022 05:10:11 AM | GTL | Michala Carter | | | \$25.00 | \$167.24 | COF |
| 08/08/2022 | | | | | \$693.85 | (\$644.12) | \$167.24 |

| Savings | | | | | | | |
|-------------|--|--|--|---------|---------|---------|----------|
| Date | | | | Deposit | Expense | Balance | Loc Code |
| 08/08/2021 | | | | | | \$0.00 | |
| No Activity | | | | | | | |
| 08/08/2022 | | | | | \$0.00 | \$0.00 | |

| Holds - Current as of Date and Time of Report | | | | | | | |
|---|--|--|--|--|--|--|--|
|---|--|--|--|--|--|--|--|

| Date Held | Hold Type | Notes | Amount |
|------------|------------|-----------------------------|---------|
| 09/15/2021 | Obligation | Auto Hold for - 06-10322-FH | \$17.64 |
| 09/15/2021 | Obligation | Auto Hold for - 19-02661-FH | \$17.64 |
| 10/14/2021 | Obligation | Auto Hold for - 06-10322-FH | \$16.14 |
| 10/14/2021 | Obligation | Auto Hold for - 19-02661-FH | \$16.14 |
| 11/15/2021 | Obligation | Auto Hold for - 06-10322-FH | \$0.50 |
| 11/15/2021 | Obligation | Auto Hold for - 19-02661-FH | \$0.50 |
| 11/15/2021 | Obligation | Auto Hold for - 06-10322-FH | \$18.06 |
| 11/15/2021 | Obligation | Auto Hold for - 19-02661-FH | \$18.06 |
| 03/14/2022 | Obligation | Auto Hold for - 06-10322-FH | \$15.96 |
| 03/14/2022 | Obligation | Auto Hold for - 19-02661-FH | \$15.96 |
| 04/15/2022 | Obligation | Auto Hold for - 06-10322-FH | \$2.10 |
| 04/15/2022 | Obligation | Auto Hold for - 19-02661-FH | \$2.10 |
| 05/21/2022 | Obligation | Auto Hold for - 06-10322-FH | \$0.10 |
| 05/21/2022 | Obligation | Auto Hold for - 19-02661-FH | \$0.10 |
| 06/18/2022 | Obligation | Auto Hold for - 06-10322-FH | \$0.52 |
| 06/18/2022 | Obligation | Auto Hold for - 19-02661-FH | \$0.52 |

Remaining Obligations - Current as of Date and Time of Report

| Description | Paid To | Max Per Period | Ordered | Transfer | Outside Source | Held | Paid | Written Off | Total Remaining |
|---|----------------------------|----------------|------------|----------|----------------|---------|----------|-------------|-----------------|
| Restitution - Court Charges - 06-10322-FH | 17TH JUDICIAL CIRCUIT KENT | N/A | \$780.00 | \$222.02 | \$0.00 | \$71.02 | \$135.32 | N/A | \$351.64 |
| Restitution - Court Charges - 19-02661-FH | 17TH JUDICIAL CIRCUIT KENT | N/A | \$1,334.00 | \$10.96 | \$0.00 | \$71.02 | \$135.32 | N/A | \$1,116.70 |
| Total: | | | | | | | | | \$1,468.34 |