

22-5723

No. _____

ORIGINAL

FILED
SEP 24 2022

OFFICE OF THE CLERK
SUPREME COURT, U.S.

IN THE
SUPREME COURT OF THE UNITED STATES

Jackie-DeVore Allen Cole — PETITIONER
(Your Name)

VS.

El Paso County Colorado — 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):

El Paso County 2020CV206 ; Colo Court of Appeals 2020CA1392 ; Colo. Sup Ct. 22SC147

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.

Jackie-DeVore Allen Cole
(Signature)

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

I, Jackie-Delver A. Cole, 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	\$ 0	\$ 0	\$ 0	\$ 0
Self-employment	\$ 0	\$ 0	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 6
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ 0	\$ 0	\$ 0
Disability (such as social security, insurance payments)	\$ 0	\$ 0	\$ 0	\$ 0
Unemployment payments	\$ 0	\$ 0	\$ 0	\$ 0
Public-assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0
Other (specify): <u>N/A</u>	\$ 0	\$ 0	\$ 0	\$ 0
Total monthly income:	\$ 6	\$ 0	\$ 0	\$ 6

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
Agape Petroleum N/A N/A	14 W Bija CO 80903 N/A	2000 to Present 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
N/A N/A N/A	N/A N/A N/A	N/A N/A N/A	\$ 0 \$ 0 \$ 0

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

Home
Value 0

Other real estate
Value 0

Motor Vehicle #1
Year, make & model N/A
Value N/A 0

Motor Vehicle #2
Year, make & model N/A
Value 0

Other assets
Description N/A
Value N/A 0

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>Weekley Estate</u>	\$ <u>Unknown</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</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>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</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>	\$ <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>	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>0</u>
Food	\$ <u>0</u>	\$ <u>0</u>
Clothing	\$ <u>0</u>	\$ <u>0</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>0</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>0</u>

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

RESIDENT ACCOUNT STATEMENT

Page 1 of 1

EL PASO COUNTY SHERIFF'S OFFICE

08/10/2022 13:37

ST 40 | OPR 13043

Inmate ID No : 0331196

Resident Name : COLE, JACKIE ALLEN

Housing Location : CJC 3G2 I 3T

Statement Period : 02/10/2022 - 08/10/2022

STATEMENT SUMMARY

	Beginning Balance :	\$0.00
2	Deposits :	\$0.65
13	Payments :	\$0.65
	Ending Balance :	\$0.00

Receipt #	Date	Time	Description	Payments	Deposits	Balance
A662578	02/16/2022	12:02	ReIntake		\$0.00	\$0.00
L51021	02/16/2022	12:11	Local Cashier-Cash		\$0.65	\$0.65
L51022	02/16/2022	12:11	Rec Payment	\$0.65		\$0.00

I hearby certify that these documents
are true and correct copies of the Inmate
Fund Account.

NameBookkeeperTitle8/10/22Date

Attached to Motion For Leave
to proceed as Poor Person

Pls retcn this
Evidence

Exhibit
E

El Paso County Sheriff's Office
Detention Bureau
Inmate Copy Request Form

Name of Inmate

Jack Cole

Admit #

A0331196

Date of Request

8-8-22

Ward

F-2

Issued By Initials/EID

Copies are \$0.10 each

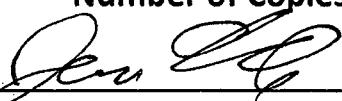
Attach paper(s) to be copied

1 For me

Number of Copies

1 For you

Inmate Signature



Signature authorizes money to be taken off books for copies

Staff Review Initials/EID

U/16065

Approved

Denied

Date 08/10/2022

Reason Denied

We do not make copies of blank forms or books.

Total Charge

Staff Initials/EID

Dear Programs, I've tried every way I know to get around this but can't. I need a way to type a document ASAP. As I will only be able to get one extension of time

DB 220s

Updated: 05.18.17

Requests for changes in the format of this form should be routed through your Chain of Command.
Update requests and specific problems with the template should be emailed to 'DETFormControl.'

Exhibit
G

over

① Pls see SC-Reg of Actions
on 5-31-22 case was
closed in Colo Sup Ct.

② Thus Cert in the next Court
is now due, hence US Sup Ct.

③ See the manacula on pg three
of the "Guide for Prospective
Indigent..." the word
"TYPE"

④ Pls see within the Rules of the
Sup Ct of the U.S. (the little
blue book) pg 43 Rule 33(1)(q),
"Clarify that...: laser printer"

⑤ Verification of doc's pls see
letter from Sup Ct dated
6-22-22

⑥ WHEREFORE, I need to type and
print ASAP to Appeal 22SC147
trale 8/8/22