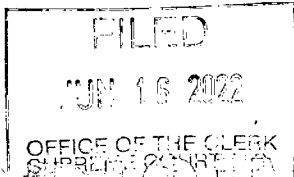


22-5823

IN THE  
SUPREME COURT OF THE UNITED STATES  
2022 TERM



ORIGINAL

No. \_\_\_\_\_

EDWARD SIMMONS 103371  
Plaintiff

VS.

LA Dept. of Public Safety + Corrections  
Defendants

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

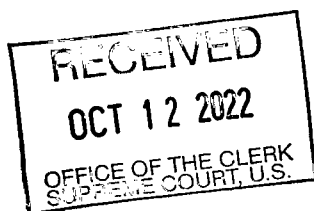
The Petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed in forma pauperis.

[ ] 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.

Edward Simmons  
(Signature)



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

I, Edward Simmons, am the Petitioner in the above-entitled case. In support of my motion to proceed in forma pauperis, I declare under penalty of perjury in accordance with U.S.C.A. 28 § 1746, 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<br>during the past 12 months |                 | Amount expected<br>next month |                 |
|--|---|-----------------|-------------------------------|-----------------|
|  | You   | Spouse          | You                           | Spouse          |
| Employment   | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Self-employment  | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Income from real property<br>(such as rental income)                       | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Interest and dividends   | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Gifts  | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Alimony  | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Child Support  | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Retirement (such as social<br>security, pensions,<br>annuities, insurance) | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |
| Disability (such as social<br>security, insurance payments)                | \$ <u>00.00</u>                                     | \$ <u>00.00</u> | \$ <u>00.00</u>               | \$ <u>00.00</u> |

|  |                 |                 |                 |                 |
|--|-----------------|-----------------|-----------------|-----------------|
| Unemployment payments                  | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> |
| Public assistance<br>(such as welfare) | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> |
| Other (specify): <u>N/A</u>            | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> |
| <b>Total monthly income:</b>           | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> | \$ <u>00.00</u> |

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

| Employer<br>monthly pay        | Address                      | Dates of<br>Employment | Gross           |
|--------------------------------|------------------------------|------------------------|-----------------|
| <u>Elayn Hunt Correctional</u> | <u>St. Gabriel, LA 70776</u> | <u></u>                | \$ <u>00.00</u> |

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or deductions.)

| Employer   | Address    | Dates of<br>Employment | Gross monthly pay |
|------------|------------|------------------------|-------------------|
| <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> | <u>N/A</u> | <u>N/A</u>             | <u>N/A</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.

| Financial institution | Type of account | Amount you have | Amount your spouse has |
|-----------------------|-----------------|-----------------|------------------------|
| <u>N/A</u>            | <u>N/A</u>      | \$ <u>None</u>  | \$ <u>N/A</u>          |
| <u>N/A</u>            | <u>N/A</u>      | \$ <u>None</u>  | \$ <u>N/A</u>          |
| <u>N/A</u>            | <u>N/A</u>      | \$ <u>None</u>  | \$ <u>N/A</u>          |

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

☐ Home N/A  
Value \$00.00

☐ Other real estate N/A  
Value \$00.00

☐ Motor Vehicle #1 N/A  
 Year, make & model N/A  
 Value \$00.00

☐ Motor Vehicle #2 N/A  
 Year, make & model N/A  
 Value \$00.00

☐ Other assets = (None)  
 Description N/A  
 Value \$00.00

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

| Person owing you or | Amount owed to you | Amount owed to your spouse |
|---------------------|--------------------|----------------------------|
| <u>N/A</u>          | \$ <u>00.00</u>    | \$ <u>00.00</u>            |
| <u>N/A</u>          | \$ <u>00.00</u>    | \$ <u>00.00</u>            |
| <u>N/A</u>          | \$ <u>00.00</u>    | \$ <u>00.00</u>            |

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

| 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<br>(include lot rented for mobile home)<br><u>\$00.00</u> | <u>\$00.00</u>   |                |
| Are real estate taxes included?   | <input type="checkbox"/> Yes <input type="checkbox"/> No N/A |                |
| Is property insurance included?   | <input type="checkbox"/> Yes <input type="checkbox"/> No N/A |                |
| Utilities (electricity, heating fuel,<br><u>\$00.00</u><br>water, sewer, and telephone) | <u>\$00.00</u>   |                |
| Home maintenance (repairs and upkeep)   | <u>\$00.00</u>   | <u>\$00.00</u> |
| Food  | <u>\$00.00</u>   | <u>\$00.00</u> |
| Clothing  | <u>\$00.00</u>   | <u>\$00.00</u> |

|                             |                |                |
|-----------------------------|----------------|----------------|
| Laundry and dry-cleaning    | <u>\$00.00</u> | <u>\$00.00</u> |
| Medical and dental expenses | <u>\$00.00</u> | <u>\$00.00</u> |

|   |                |                |
|---|----------------|----------------|
| Transportation (not including motor vehicle payments) | <u>\$00.00</u> | <u>\$00.00</u> |
|---|----------------|----------------|

|   |                |                |
|---|----------------|----------------|
| Recreation, entertainment, newspapers, magazines, etc | <u>\$00.00</u> | <u>\$00.00</u> |
|---|----------------|----------------|

Insurance (not deducted from wages or included in mortgage payments)

|                         |                |                |
|-------------------------|----------------|----------------|
| Homeowner's or renter's | <u>\$00.00</u> | <u>\$00.00</u> |
|-------------------------|----------------|----------------|

|      |                |                |
|------|----------------|----------------|
| Life | <u>\$00.00</u> | <u>\$00.00</u> |
|------|----------------|----------------|

|        |                |                |
|--------|----------------|----------------|
| Health | <u>\$00.00</u> | <u>\$00.00</u> |
|--------|----------------|----------------|

|               |                |                |
|---------------|----------------|----------------|
| Motor Vehicle | <u>\$00.00</u> | <u>\$00.00</u> |
|---------------|----------------|----------------|

|                   |                |                |
|-------------------|----------------|----------------|
| Other: <u>N/A</u> | <u>\$00.00</u> | <u>\$00.00</u> |
|-------------------|----------------|----------------|

Taxes (not deducted from wages or included in mortgage payments)

|                       |                |                |
|-----------------------|----------------|----------------|
| (specify): <u>N/A</u> | <u>\$00.00</u> | <u>\$00.00</u> |
|-----------------------|----------------|----------------|

Installment payments

|               |                |                |
|---------------|----------------|----------------|
| Motor Vehicle | <u>\$00.00</u> | <u>\$00.00</u> |
|---------------|----------------|----------------|

|                |                |                |
|----------------|----------------|----------------|
| Credit card(s) | <u>\$00.00</u> | <u>\$00.00</u> |
|----------------|----------------|----------------|

|                     |                |                |
|---------------------|----------------|----------------|
| Department store(s) | <u>\$00.00</u> | <u>\$00.00</u> |
|---------------------|----------------|----------------|

|                   |                |                |
|-------------------|----------------|----------------|
| Other: <u>N/A</u> | <u>\$00.00</u> | <u>\$00.00</u> |
|-------------------|----------------|----------------|

|  |                |                |
|--|----------------|----------------|
| Alimony, maintenance, and support paid to others | <u>\$00.00</u> | <u>\$00.00</u> |
|--|----------------|----------------|

|   |                |                |
|---|----------------|----------------|
| Regular expenses or operation of business, profession,<br>or farm (attach detailed statement) | <u>\$00.00</u> | <u>\$00.00</u> |
|---|----------------|----------------|

|                             |                |                |
|-----------------------------|----------------|----------------|
| Other (specify): <u>N/A</u> | <u>\$00.00</u> | <u>\$00.00</u> |
|-----------------------------|----------------|----------------|

**Total monthly expenses:**

9. Do you expect any major changes to your monthly income 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? \$00.00

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 you explain why you cannot pay the costs of this case.

I am indigent, making only incentive pay which goes towards my personal hygiene expenses.

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

Executed on: 9-26-2022, 2012.

Edward Simmons 103371  
(Signature)

**STATEMENT OF ACCOUNT**  
**(Certified Institutional Equivalent)**

I hereby certify that Edward Simmons, inmate number 103371, the plaintiff herein has the following sums of money on account to his credit at ELAYN HUNT CORRECTIONAL CENTER ST. GABRIEL, LOUISIANA, the institution where he is confined:

Prison Drawing Account: \$ 0.00

Prison Savings Account: \$ 0.00

A. Cash \$ N/A

B. Bonds \$ N/A

I further certify that the average monthly deposits for the preceding six months is \$ 0.00

(The average monthly deposits are to be determined by adding the deposits made during a given month and dividing that total by the number of deposits made during that month. This is repeated for each of the six months. The average from each of the six months are to be added together and the total is to be divided by six.)

I further certify that the average monthly balance for the prior six months is \$ 0.02.

(The average monthly balance is to be determined by adding each day's balance for a given month and dividing that total by the number of days in that month. This is to be repeated for each of the six months. The balance from each of the six months are to be added together and the total is to be divided by six.)

9-26-2022  
Date Certified

Brenda Gooden, Elayn Hunt C.C.  
Signature of Authorized Officer of Institution  
and Title of Institution