

22-6070

FILED

AUG 22 2022

OFFICE OF THE CLERK
SUPREME COURT, U.S.

No. _____

IN THE

SUPREME COURT OF THE UNITED STATES

CHARLES ROCHESTER - PRO-SE, PETITIONER

VS.

THE CITY OF NEW YORK, NEW YORK CITY POLICE DEPARTMENT, BRONX 44TH PCT. AND
NBBX/NARCBX UNIT FIELD TEAM – Lt. CAMHI, Det. Daniel Rivera,
Det. Mazza, Sgt. Massa, and Undercover Officers Female/Male a.k.a. John doe's

RESPONDENTS

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

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

☒ The petitioner has previously been granted leave to proceed in forma pauperis in the following courts, by different docket numbers, that all arises from this case in the above caption respondents.

New York State Supreme Court Bronx County, (Instant case) above caption

Nexus link cases at New York State Supreme Court -Bronx County Special Proceeding – Article 78 that was file, due to Respondent not complying to discovery request, I had to filed for Freedom of Information – against NYPD – FOIL officer. Also, in another Nexus Link forma pauperis was granted in United States District Court Southern District of New York 2020

☒ The petitioner affidavit or declaration in support of this motion is attached hereto

☒ The appointment was made under the following provision of law Rule 24 or CPLR 1101 Art.

☒ The copy of the order of appointment is appended

The Petitioner has not been previously been granted leave to proceed in forma pauperis in the New York State Appellant Court First Department, (Denied Three Times)

The Petitioner has not been previously been granted leave to proceed in forma pauperis in the Court of Appeals New York State- Highest Court in N.Y.S. (Denied Twice)

Charles Rochester

Charles Rochester -petitioner - pro-se

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

I, Charles Rochester, 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>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Self-employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Gifts	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Child Support	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>Pending</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>183.00</u>	\$ <u>N/A</u>	\$ <u>Same</u>	\$ <u>N/A</u>
Other (specify): <u>Food Stamp</u>	\$ <u>250.00</u>	\$ <u>N/A</u>	\$ <u>Same</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>183.00</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

Cash
\$ 91.50 Bi/weekly
2-5

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	/	\$ /
			\$ /
			\$ /

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
			\$ /
			\$ /

4. How much cash do you and your spouse have? \$ 0 N/A
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
	\$ /	\$ /
	\$ /	\$ /

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 NONE
Value 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

N/A

Amount owed to you

\$ N/A

Amount owed to your spouse

\$ N/A

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

N/A

Relationship

N/A

Age

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)

Are real estate taxes included? ☐ Yes ☐ No

Is property insurance included? ☐ Yes ☐ No

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

Home maintenance (repairs and upkeep)

Food

Clothing

Laundry and dry-cleaning

Medical and dental expenses

You

\$ N/A

Your spouse

\$ N/A

\$ N/A

\$ N/A

\$ Food Stamp

\$ 0

\$ 10.00

\$ Public Assist.

\$ N/A

\$

\$

\$

\$

\$

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

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.

Social Service Disability Pending a
Decision From Administrative Judge

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? N/A

If yes, state the attorney's name, address, and telephone number:

N/A

11. Have you paid—or will you be paying—anyone other than an attorney (such as a paralegal or typist) any money for services in connection with this case, including the completion of this form?

☒ Yes

☐ No

If yes, how much?

round or about \$400.00, and Counting Mail, Copying

If yes, state the person's name, address, and telephone number:

Miss Vivian Mendoza 135-A Bronx NY 10452 #1B
718-681-0307

12. Provide any other information that will help explain why you cannot pay the costs of this case.

I am on Public Assistance, with an Income Cash
of \$91.50 every two weeks, and \$50. in Food Stamps each
Month that it

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

Executed on: 9/27/2022, 20

28 USC 1746

Charles Rochester
(Signature)