

Supreme Court, U.S. FILED OCT 2 5 2022 OFFICE OF THE CLERK

## IN THE

## SUPREME COURT OF THE UNITED STATES

Albert Holland, Jr. – PETITIONER (Your Name)

VS.

## State of Florida, et Al. -- 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*.

[ Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):

Supreme Court of FLorida, U.S. District Court U.S. Court of Appeals, For Eleventh Circuit (minmi)

[] 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.

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(Signature)



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

I, <u>Albert Holland</u>, 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		monthly amou 12 months	int during	Amount expect next month	sted
		You	Spouse	You	Spouse
Employment	;	\$ <u>NONC</u>	\$ <u>NONE</u>	\$ <u>NONC</u>	\$ <u>NONC</u>
Self-employment		\$ <u>NONC</u>	\$ <u>NONE</u>	\$ <u>NONC</u>	\$ <u>None</u>
Income from real prope (such as rental income		\$ <u>NONC</u>	\$_NONC	\$ <u>NONE</u>	\$ <u>NONC</u>
Interest and dividends	Ś	\$ <u>NONC</u>	\$_NONC	\$ NONE	\$ <u>NONC</u>
Gifts	S	\$ <u>NONE</u>	\$_NONC	\$ <u>NONC</u>	\$ <u>NONC</u>
Alimony	S	\$ NONC	\$ <u>NONC</u>	\$ <u>NONC</u>	\$ <u>NONC</u>
Child Support	S	\$ <u>None</u>	\$ <u>NONC</u>	\$ <u>NONC</u>	\$ <u>NONC</u>
Retirement (such as so security, pensions, annuities, insurance)	ocial S	\$ <u>NONE</u>	\$ <u>NONE</u>	\$ <u>NONE</u>	\$ <u>NONE</u>
Disability (such as soci security, insurance pay		<u>NONC</u>	\$ <u>NONC</u>	\$_NONE_	\$_ <u>NONC</u>
Unemployment paymer	nts \$	NONE	\$ <u>NONE</u>	\$_ <u>NONE</u>	\$ <u>NONE</u>
Public-assistance (such as welfare)	\$	NONE	\$ <u>NONC</u>	\$ <u>NONE</u>	\$_ <i>NONC</i>
Other (specify): <u>None</u>	\$\$	NONE	\$ <u>NONC</u>	\$ <u>NONE</u>	\$ <u>NoNe</u>
Total monthly in	come: \$	NONE	\$ <u>NONE</u>	\$ <u>NONE</u>	\$ <u>NONE</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
NONC	NONE	NeNe	\$_NONC
			\$ \$

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
NONE	NONE	NONE	\$ <u>NoNC</u> \$
			\$

4. How much cash do you and your spouse have? \$\_\_\_\_\_\_\_ Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account		Amount your spouse has
NONE	NONE	\$ <u>NONC</u>	\$ <u>NONE</u>
		\$	\$
		\$	\$

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

🗌 Home		$\Box$ Other real estate
Value _	NONE	Value

🗌 Motor Vehicle #1	
Year, make & model _	NONE
Value _ <i>NoNE</i>	

🗆 Motor Vehi	cle #2		
Year, make	& model	NONE	

Value NoNe

□ Other assets
Description <u>NONE</u>
Value <u>NONE</u>

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
NONC	\$ <u>NONE</u>	\$ <u>NONE</u>
	\$	\$
	\$	\$

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

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	Name	Relationship	Age	
. ·	NONE	NONC	NONG	_
				_
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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) Are real estate taxes included?	\$ <u>NONC</u>	\$ <i>Nøne</i>
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$NONE	\$NONC
Home maintenance (repairs and upkeep)	\$ <u>NONC</u>	\$ <u>NONE</u>
Food	\$ <u>NONE</u>	\$ <u>NONE</u>
Clothing	\$ <u>NONC</u>	\$ <u>NONC</u>
Laundry and dry-cleaning	\$ <u>NONE</u>	\$NONC
Medical and dental expenses	\$_NONC	\$ <u>NONE</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$_NONC	\$ <i>NeNE</i>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>NONC</u>	\$
Insurance (not deducted from wages or included in mort	gage payments)	
Homeowner's or renter's	\$ <u>NONC</u>	\$NONC
Life	\$ <u>NONC</u>	\$_NONE
Health	\$ <u>NONC</u>	\$ <u>NONE</u>
Motor Vehicle	\$_NONE	\$_NONE
Other:	\$ <u>NØNC</u>	\$NONC
Taxes (not deducted from wages or included in mortgage	e payments)	
(specify): <b>None</b>	\$ NONE	\$_NONC
Installment payments		
Motor Vehicle	\$	\$_NONC
Credit card(s)	\$ <u>NONC</u>	\$ <u>NANE</u>
Department store(s)	\$ <u>NONE</u>	\$ <u>NONC</u>
Other:		\$ <u>NONG</u>
Alimony, maintenance, and support paid to others	<u>\$_NONC</u>	\$ NONE
Regular expenses for operation of business, profession, or farm (attach detailed statement)		\$ <u>NONC</u>
Other (specify):	\$ <u>NONC</u>	\$_NONE
Total monthly expenses:	\$ <u>NONE</u>	\$_NONC

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9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

 $\Box$  Yes 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?  $\Box$  Yes  $\blacksquare$  No

If yes, how much?
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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?
  - M No T Yes

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've been confined in jail-prison (on Florida's Deathrow), Since July 29, 1990, with NO WAY to CATN AN INCOME.

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

Executed on:	October	24,	, 20, <b>22</b>
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(Signature)

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