

No. 22-6382

ORIGINAL

Supreme Court, U.S.
FILED

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IN THE SUPREME COURT
OF THE UNITED STATES OF AMERICA

Provided to Walton CI
On 12-7-22 for Mailing
Date

By (officer initials) MC

WARREN, JAMES

Petitioner / Appellant

v.

STATE OF FLORIDA

Respondents / Appellees

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

James Warren
DC#C02636
Walton Correctional Institution
691 Institution Road
DeFuniak Springs, Fl. 32433

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The petitioner asks for leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*. The petitioner attests to the following;

1. The petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s): The Circuit Court of the Judicial Circuit for County; Case No. : and, The District Court of Appeals, State of Florida; Case No. :

2. The petitioner's affidavit or declaration in support of this motion is attached hereto.

Respectfully Submitted,

/S/ James L. Warren

James Warren
DC#C02636

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

I, your name 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>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

Public Assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify); _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<hr/>				
Total Monthly income	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</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>NONE</u>	<u>NONE</u>	<u>NONE</u>	\$ <u>NONE</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>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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

Type of account(e.g., checking or savings)	Amount you have	Amount your spouse has
<u>NONE</u>	\$ <u>NONE</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

Other real estate

Motor Vehicle #1
Year, make, & model

Motor Vehicle #2
Year, make, & model

Value Ø

Value Ø

Value Ø

Value Ø

Other assets Description: POPE

Value Ø

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

POPE

\$ POPE
\$ _____
\$ _____

\$ POPE
\$ _____
\$ _____

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
POPE

Relationship
NONE

Age
POPE

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)

You

Your spouse

\$ Ø

\$ Ø

Are real estate taxes included? ☐ Yes ☐ No

Is property insurance included? ☐ Yes ☐ No

	You	Your spouse
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>
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines etc.	\$ <u>0</u>	\$ <u>0</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>0</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Other; <u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>
Installment payments		
Motor vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit card(s)	\$ <u>0</u>	\$ <u>0</u>

	You	Your spouse
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: <u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>0</u>
Other: (specify)	\$ <u>0</u>	\$ <u>0</u>
Total monthly expenses:	\$ <u>0</u>	\$ <u>0</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? NONE

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 typist) any money for services in connection with this case, including the completion of this form?

If yes, how much? _____

If yes, state the attorney'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 declare under penalty of perjury that the foregoing is true and correct.

Respectfully Submitted,

/S/ James L Warren

James Warren
DC#C02636