

22-6806

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

Provided To: Moore Haven C.F.

FEB 07 2023

For Mailing 7w

By: \_\_\_\_\_

IN THE  
SUPREME COURT OF THE UNITED STATES

ORIGINAL

Supreme Court, U.S.  
FILED

FEB 07 2023

OFFICE OF THE CLERK

TORREY D.

WAIKER

(Your Name)

— PETITIONER

vs.

WARDEN

— 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 cost s 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 courts: U.S MIDDLE DISTRICT, FT. MYERS FLORIDA  
CASE # 2:19-CV-190-FTM-38MRM

☐ 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. ATTACHED ALSO, IS INMATE ACCOUNT STATEMENT, LAST 6 MONTHS

☐ 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.

Orrey Duane Walker

(Signature)

M.H.C.F

Post office box 719001

MOORE HAVEN, FLORIDA 33471

# AFFIDAVIT OR DECLARATION

FEB 07 2023

## IN SUPPORT OF MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

By: \_\_\_\_\_

I, TORREY D. WALKER, 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 cost of this case or to give security thereof; 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 during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Self-Employment	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Income from real property				
(such as rental income)	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Interest and dividends	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Gifts	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Alimony	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Child Support	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Unemployment payments	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Public assistance (such as welfare)	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
Other (specify): <u>0</u>	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</u>
<b>Total monthly income:</b>	\$ <u>0</u>	\$ <u>-</u>	\$ <u>0</u>	\$ <u>-</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	Date of Employment	Gross monthly pay
—	—	—	\$ —
—	—	—	\$ —
—	—	—	\$ —

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	Date of Employment	Gross monthly pay
—	—	—	\$ —
—	—	—	\$ —
—	—	—	\$ —

4. How much cash do you and your spouse have? \$ 0  
Below, state any money you and your spouse have in bank accounts or any other financial institution.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
—	\$ — <u>0</u>	\$ —
—	\$ — <u>0</u>	\$ —
—	\$ — <u>0</u>	\$ —

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

<input type="checkbox"/> Home Value —	<input type="checkbox"/> Other real estate Value —
<input type="checkbox"/> Motor Vehicle # 1 Value —	<input type="checkbox"/> Motor Vehicle # 2 Value —
<input type="checkbox"/> Other assets	
Description: —	
Value —	

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
IRS	\$ 600 (on) 1200	\$ —
	\$ —	\$ —
	\$ —	\$ —

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
—	—	—
—	—	—
—	—	—

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)	\$ 0	\$ —
Are real estate taxes included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is property insurance included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 0	\$ —
Home maintenance (repairs and upkeep)	\$ 0	\$ —
Food	\$ 0	\$ —
Clothing	\$ 0	\$ —
Laundry and dry cleaning	\$ 0	\$ —
Medical and dental expenses	\$ 0	\$ —
Transportation (not including motor vehicle payments)	\$ 0	\$ —

Recreation , entertainment, newspapers,  
magazines, etc.

\$ 0 \$ —

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

Home owner's or renter's

\$ 0 \$ —

Life

\$ 0 \$ —

Health

\$ 0 \$ —

Motor vehicle

\$ 0 \$ —

Other: —

\$ 0 \$ —

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

Specify: —

\$ 0 \$ —

Installment payments

Motor vehicle

\$ 0 \$ —

Credit card(s)

\$ 0 \$ —

Department Store(s)

\$ 0 \$ —

Other: —

\$ 0 \$ —

Alimony, maintenance, and support paid to  
others

\$ 0 \$ —

Regular expenses for operation of business,  
profession, or farm (attach detailed  
statement)

\$ 0 \$ —

Other (specify): —

\$ 0 \$ —

**Total monthly expenses:**

\$ 0 \$ —

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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?

☐ Yes ☐ No If yes, described on an attached sheet.

\* SEE # 12 BELOW

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 \_\_\_\_\_

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 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 \_\_\_\_\_

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. IVE BEEN INCARCERATED SINCE 9-24-2013, IVE ONLY MADE AN COVID-19 STIMULAS IN 2021 "A RECOVERY REBATE FROM 2019". I STILL HAVENT RECEIVED MY 2020 STIMULAS "REBATE", STILL AWAITING, IT'S BEEN 2 YRS & COUNTING, THERE FOR, STILL INDIGENT.

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

Executed on 2-7-2023, 2023.

\*  
P.S ATTACHED IS, LAST 6 MONTH  
INMATE ACCOUNT STATEMENT

Orley Chayenaka  
(Signature)  
M.H.C.F.  
Post office box 719001  
6 MOORE HAVEN, FLORIDA 33471