

No. 22-7255

PROVIDED TO TOMOKA
CORRECTIONAL INSTITUTION
ON 2/21/23
FOR MAILING BY 70

IN THE
SUPREME COURT OF THE UNITED STATES

ORIGINAL

Supreme Court, U.S.
FILED
MAR 30 2023
OFFICE OF THE CLERK

THOMAS L. EAST — PETITIONER
(Your Name)

VS.
STATE OF FLORIDA, ET. AL.,
GARDNER AND ASHLEY MOORE, AG. — 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*.

Please check the appropriate boxes:

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

SUPREME COURT OF THE UNITED STATES: CERTIORARI NO. 20:8025

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.

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.



(Signature)

RECEIVED

FEB 22 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.

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

I, THOMAS L. EAST, 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>
Self-employment	\$ <u>1</u>	\$ <u>1</u>	\$ _____	\$ <u>1</u>
Income from real property (such as rental income)	\$ _____	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ _____	\$ _____	\$ _____	\$ _____
Gifts	\$ _____	\$ _____	\$ _____	\$ _____
Alimony	\$ _____	\$ _____	\$ _____	\$ _____
Child Support	\$ _____	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Disability (such as social security, insurance payments)	VA. \$ <u>76 32</u>	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Other (specify): <u>N.A.</u>	\$ <u>0</u>	\$ <u>0</u>	\$ _____	\$ <u>0</u>
Total monthly income:	\$ <u>76 32</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
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	∅	∅	\$ ∅
∅	∅	∅	\$ ∅
∅	∅	∅	\$ ∅

4. How much cash do you and your spouse have? \$ 0.00

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
∅	\$ ∅	\$ ∅
∅	\$ ∅	\$ ∅
∅	\$ ∅	\$ ∅

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

Home
Value ∅

Other real estate
Value ∅

Motor Vehicle #1
Year, make & model ∅
Value ∅

Motor Vehicle #2
Year, make & model ∅
Value ∅

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
\$ <u>0</u>	\$ <u>0</u>	
\$ <u>0</u>	\$ <u>0</u>	
\$ <u>0</u>	\$ <u>0</u>	

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
N-A	<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>	<u>0</u>
<u>0</u>	<u>0</u>	<u>0</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 (include lot rented for mobile home)	\$ <u>0</u>	\$ <u>0</u>
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>1</u>	\$ <u>1</u>
Home maintenance (repairs and upkeep)	\$ <u>1</u>	\$ <u>1</u>
Food	\$ <u>1</u>	\$ <u>1</u>
Clothing	\$ <u>1</u>	\$ <u>1</u>
Laundry and dry-cleaning	\$ <u>1</u>	\$ <u>1</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>0</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>1</u>	\$ <u>1</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ _____	\$ _____
Health	\$ _____	\$ _____
Motor Vehicle	\$ _____	\$ _____
Other: <u>N-A</u>	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>N-A</u>	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ _____	\$ _____
Credit card(s)	\$ _____	\$ _____
Department store(s)	\$ _____	\$ _____
Other: <u>N-A</u>	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ _____
Other (specify): <u>PERSON EXPENSES (FOOD, SUPLIES)</u>	\$ <u>76 32</u>	\$ <u>1</u>
Total monthly expenses:	\$ <u>76 32</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? 0

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

Yes No

If yes, how much? 0

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

N-A

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

ON-GOING, LONG-TERM LEGAL MAIL ACT VIOLATIONS WITH NO
RELIEF FROM F.B.I. OR U.S.D.O.J.

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

Executed on: FEBRUARY 9th, 2023



(Signature)

IBSR140 (74)

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FOR: 07/06/2022 - 01/06/2023

01/06/23
09:29:53
PAGE 2

ACCT NAME: FAST, THOMAS L.
BED: K2143S
PO BOX:

ACCT#: 818015
TYPE: INMATE TRUST

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/-	AMOUNT	BALANCE
09/02/22	148	LEGAL COPIES WD	28220220638	000		-	\$0.00	\$76.33
		LIEN CREATED	- 09/02/2022	28220220638				
09/04/22	061	CANTEEN SALES	28220220903	000		-	\$25.98	\$50.35
09/05/22	061	CANTEEN SALES	28220220904	000		-	\$8.70	\$41.65
09/06/22	061	CANTEEN SALES	28220220905	000		-	\$7.20	\$34.45
09/08/22	061	CANTEEN SALES	28220220907	000		-	\$7.19	\$27.26
09/08/22	134	INDIVIDUAL CHEC	0772742	000	SELF-HELP LEGAL GUIDES	- (\$32.50)	\$59.76
09/08/22	137	MEDICAL BILLS W		000		-	\$0.00	\$59.76
		LIEN CREATED	- 09/08/2022					
09/09/22	061	CANTEEN SALES	28220220908	000		-	\$3.08	\$56.68
09/10/22	061	CANTEEN SALES	28220220909	000		-	\$2.24	\$54.44
09/13/22	061	CANTEEN SALES	28220220912	000		-	\$9.92	\$44.52
09/14/22	061	CANTEEN SALES	28220220913	000		-	\$17.78	\$26.74
09/18/22	061	CANTEEN SALES	28220220917	000		-	\$1.62	\$25.12
09/29/22	109	INDIVIDUAL CHEC	0776964	000	GEORGETOWN LAW ARCP	-	\$25.00	\$0.12
10/04/22	150	VETERAN'S BENEF	403510433500	000	VA ADMINISTRATION	+	\$76.32	\$76.44
10/05/22	061	CANTEEN SALES	28220221004	000		-	\$0.09	\$76.35
10/06/22	059	CANTEEN SALES	28220221005	000		-	\$67.11	\$9.24
10/07/22	149	MEDICAL CO-PAY	1006221403RR	000		-	\$0.00	\$9.24
		LIEN CREATED	- 10/07/2022	1006221403RR				
10/09/22	061	CANTEEN SALES	28220221008	000		-	\$3.00	\$6.24
10/10/22	061	CANTEEN SALES	28220221009	000		-	\$2.12	\$4.12
10/11/22	061	CANTEEN SALES	28220221010	000		-	\$2.00	\$2.12
10/21/22	059	CANTEEN SALES	28220221020	000		-	\$0.30	\$1.82
10/26/22	061	CANTEEN SALES	28220221025	000		-	\$1.18	\$0.64
10/28/22	061	CANTEEN SALES	28220221027	000		-	\$0.64	\$0.00
11/03/22	132	VETERAN'S BENEF	403510493636	000	VA ADMINISTRATION	+	\$76.32	\$76.32
11/06/22	061	CANTEEN SALES	28220221105	000		-	\$75.92	\$0.40
11/19/22	233	MEDICAL CO-PAY	1118221045RR	000		-	\$0.00	\$0.40
		LIEN CREATED	- 11/19/2022	1118221045RR				
11/21/22	238	LEGAL POSTAGE W	2022102701	000		-	\$0.00	\$0.40
		LIEN CREATED	- 11/21/2022	2022102701				
11/21/22	238	LEGAL POSTAGE W	2022101701	000		-	\$0.00	\$0.40
		LIEN CREATED	- 11/21/2022	2022101701				
11/21/22	238	LEGAL POSTAGE W	2022110301	000		-	\$0.00	\$0.40
		LIEN CREATED	- 11/21/2022	2022110301				
11/21/22	238	LEGAL POSTAGE W	2022110302	000		-	\$0.00	\$0.40
		LIEN CREATED	- 11/21/2022	2022110302				
11/21/22	238	LEGAL POSTAGE W	2022110303	000		-	\$0.00	\$0.40
		LIEN CREATED	- 11/21/2022	2022110303				
12/06/22	059	CANTEEN SALES	28220221205	000		-	\$0.40	\$0.00
12/08/22	128	VETERAN'S BENEF	403510568993	000	VA Administration	+	\$76.32	\$76.32
12/12/22	059	CANTEEN SALES	28220221211	000		-	\$66.29	\$10.03
12/13/22	122	LEGAL POSTAGE W	2022120601	000		-	\$0.00	\$10.03
		LIEN CREATED	- 12/13/2022	2022120601				

IBSR140 (74)

FLORIDA DEPARTMENT OF CORRECTIONS
TRUST FUND ACCOUNT STATEMENT
FOR: 07/06/2022 - 01/06/2023

01/06/23
09:29:53
PAGE 4

ACCT NAME: FAST, THOMAS L.
BED: K2143S
PO BOX:

ACCT#: 818015
TYPE: INMATE TRUST

LIEN DATE	TYPE OF LIEN	LIEN FACL	AMOUNT OF LIEN	AMOUNT STILL OWED
11/21/22	LEGAL POSTAGE	000	\$0.81	\$0.81
11/21/22	LEGAL POSTAGE	000	\$0.57	\$0.57
12/13/22	LEGAL POSTAGE	000	\$12.05	\$12.05
12/13/22	LEGAL POSTAGE	000	\$20.45	\$20.45
12/13/22	LEGAL POSTAGE	000	\$14.00	\$14.00
12/13/22	LEGAL POSTAGE	000	\$10.95	\$10.95
12/15/22	MEDICAL CO-PAYMENT	000	\$5.00	\$5.00

IBSR140 (74)

FLORIDA DEPARTMENT OF CORRECTIONS
 TRUST FUND ACCOUNT STATEMENT
 FACILITY: 282 - TOMOKA C.I.
 FOR: 01/01/2023 - 01/31/2023

02/02/23
 13:40:49
 PAGE 141

ACCT NAME: FAST, THOMAS L.
 BED: K2143S
 PO BOX:

ACCT#: 818015
 TYPE: INMATE TRUST

BEGINNING BALANCE 01/01/23 \$10.03

POSTED DATE	NBR	TYPE	REFERENCE NUMBER	FAC	REMITTER/PAYEE	+/-	AMOUNT	BALANCE
01/03/23	059	CANTEEN SALES	28220230102	000		-	\$5.48	\$4.55
01/04/23	061	CANTEEN SALES	28220230103	000		-	\$4.55	\$0.00
01/05/23	115	VETERAN'S BENEF	403510644329	000	VA ADMINISTRATION	+	\$82.96	\$82.96
01/07/23	061	CANTEEN SALES	28220230106	000		-	\$67.12	\$15.84
01/08/23	061	CANTEEN SALES	28220230107	000		-	\$3.60	\$12.24
01/09/23	061	CANTEEN SALES	28220230108	000		-	\$1.80	\$10.44
01/10/23	237	MEDICAL CO-PAY	0109230708RR	000		-	\$0.00	\$10.44
		LIEN CREATED	- 01/10/2023	0109230708RR				
01/16/23	061	CANTEEN SALES	28220230115	000		-	\$0.44	\$10.00
01/19/23	107	INDIVIDUAL CHEC	0781179	000	US DISTRICT COURTS	-	\$10.00	\$0.00
01/20/23	161	LEGAL POSTAGE W	2023011001	000		-	\$0.00	\$0.00
		LIEN CREATED	- 01/20/2023	2023011001				
01/20/23	161	LEGAL POSTAGE W	2023011301	000		-	\$0.00	\$0.00
		LIEN CREATED	- 01/20/2023	2023011301				
01/20/23	161	LEGAL POSTAGE W	2023011302	000		-	\$0.00	\$0.00
		LIEN CREATED	- 01/20/2023	2023011302				
01/20/23	161	LEGAL POSTAGE W	2023011303	000		-	\$0.00	\$0.00
		LIEN CREATED	- 01/20/2023	2023011303				

ENDING BALANCE 01/31/23 \$0.00

LIEN DATE	TYPE OF LIEN	LIEN FACTL	AMOUNT OF LIEN	AMOUNT STILL OWED
SUMMARY	MEDICAL CO-PAYMENT		\$45.00	\$45.00
SUMMARY	LEGAL POSTAGE		\$109.52	\$109.52
SUMMARY	MEDICAL BILLS		\$1.75	\$1.75
SUMMARY	LEGAL COPIES		\$1.80	\$1.80
01/10/23	MEDICAL CO-PAYMENT	000	\$5.00	\$5.00
01/20/23	LEGAL POSTAGE	000	\$0.57	\$0.57
01/20/23	LEGAL POSTAGE	000	\$2.40	\$2.40
01/20/23	LEGAL POSTAGE	000	\$3.36	\$3.36
01/20/23	LEGAL POSTAGE	000	\$0.57	\$0.57