

No. 22-7710

ORIGINAL

Supreme Court, U.S.
FILED

FEB 09 2023

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

MICHAEL WALKER — PETITIONER

(Your Name)

VS.

Superintendent, Bennett 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*.

Please check the appropriate boxes:

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

ON APPEAL FROM the U.S. District Court, Superior Court
OF Pennsylvania Direct Appeal, U.S. COURT OF APPEALS FOR THE 3rd CIRCUIT
COURT

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.

Michael Walker

(Signature)

RECEIVED

MAY 25 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.

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

I, Michael 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 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	\$ 80.00	\$ N/A	\$ NONE	\$ NONE
Self-employment	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Income from real property (such as rental income)	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Interest and dividends	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Gifts	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Alimony	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Child Support	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Retirement (such as social security, pensions, annuities, insurance)	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Disability (such as social security, insurance payments)	\$ N/A	\$ N/A	\$ NONE	\$ NONE
Unemployment payments	\$ N/A	\$ NONE	\$ NONE	\$ NONE
Public-assistance (such as welfare)	\$ N/A	\$ NONE	\$ NONE	\$ NONE
Other (specify): <u>Kitchen</u>	\$	\$ NONE	\$ NONE	\$ NONE
Deductions				
Total monthly income:	\$ 60.57	\$ NONE	\$ NONE	\$ NONE

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 and your spouse have? \$ _____
 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
<u>None</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

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

Home

Value None

Other real estate

Value None

Motor Vehicle #1

Year, make & model None

Motor Vehicle #2

Year, make & model None

Value _____

Value _____

Other assets

Description None

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>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
	\$ <u>N/A</u>	\$ <u>N/A</u>
	\$ <u>N/A</u>	\$ <u>N/A</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
<u>None</u>	<u>None</u>	<u>None</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>None</u>	\$ <u>None</u>
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)	\$ <u>None</u>	\$ <u>None</u>
Home maintenance (repairs and upkeep)	\$ <u>None</u>	\$ <u>None</u>
Food	\$ <u>None</u>	\$ <u>None</u>
Clothing	\$ <u>None</u>	\$ <u>None</u>
Laundry and dry-cleaning	\$ <u>None</u>	\$ <u>None</u>
Medical and dental expenses	\$ <u>None</u>	\$ <u>None</u>

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

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 a typist) 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 person's name, address, and telephone number:

NONE

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

Petitioner, is indigent, NO Family, NOR Friends, OR
Out Side Supporters, Petitioner ONLY Makes \$88.00 a Month
After Deduction of 20.00, Petitioner, Monthly account is 60.57.
I declare under penalty of perjury that the foregoing is true and correct.

Executed on: _____, 20____

Michael Walker
(Signature)

**Integrated Offender Case Management System**

5/1/2023 9:58:10 AM

Monthly Account Statement

From Date: 04/01/2023

To Date: 04/30/2023

Housing	Case ID	Offender Name	Location	
G-A-1069-01	MA9201	WALKER, MICHAEL	BENNER TOWNSHIP	
Batch#	Txn Date	Txn Description	Txn Amount(\$)	Balance After Transaction(\$)
BEN-036819	04/18/2023	10 - Maintenance Payroll (GRP 3 - 14th -13th)	+80.00	80.57
BEN-036819	04/18/2023	50 - Act 84 (cp-06-cr-0001328-2012)	-20.00	60.57
BEN-036875	04/24/2023	32 - Commissary (BEN COMMISSARY FOR 04/24/2023)	-58.65	1.92
Current, Escrow, & Available Balances are as of 5/1/2023 9:58:10 AM				
Current Balance		1.92		
Escrow Balance		0.00		
Available Balance		1.92		