

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

IN THE  
SUPREME COURT OF THE UNITED STATES

---

VIVIAN WOODSTOCK,  
*Petitioner,*

v.

STATE OF FLORIDA,  
*Respondent.*

---

On Petition for a Writ of Certiorari to the  
District Court of Appeal for the  
Second District of Florida

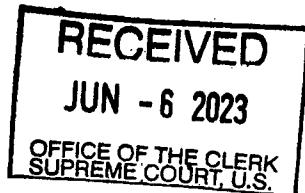
---

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

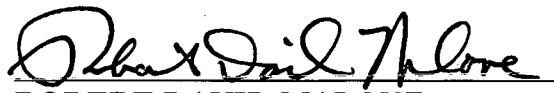
---

The Petitioner, Vivian Woodstock, asks leave to file the enclosed Petition for a Writ of Certiorari to the Supreme Court of the United States without prepayment of costs and to proceed *In Forma Pauperis* in accordance with Supreme Court Rule 39. The Petitioner is a prisoner in the Florida Department of Corrections and has previously been granted permission to appeal *In Forma Pauperis* as to filing fees in this cause by the Circuit Court for the Thirteenth Judicial Circuit, in and For Hillsborough County, Florida. *See attached.*

WHEREFORE, Petitioner, Vivian Woodstock prays for leave to proceed *In Forma Pauperis.*



Respectfully submitted,



**ROBERT DAVID MALOVE**

The Law Office of

Robert David Malove, P.A.

200 S.E. 9th Street

Ft. Lauderdale, Florida 33316

(954) 861-0384

Counsel of Record

Attorney for Petitioner

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

I, **VIVIAN WOODSTOCK**, 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>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Self-employment	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Income from real property (such as rental income)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Interest and dividends	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Gifts	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Alimony	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Child Support	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Disability (such as social security, insurance payments)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Unemployment payments	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Public-assistance (such as welfare)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Other (specify): _____	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
<b>Total monthly income:</b>	<b>\$ <u>0.00</u></b>	<b>\$ <u>0.00</u></b>	<b>\$ <u>0.00</u></b>	<b>\$ <u>0.00</u></b>

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
<b>UNEMPLOYED</b>	_____	_____	\$ 0.00
	_____	_____	\$ 0.00
	_____	_____	\$ 0.00

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.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
<b>NOT MARRIED</b>	_____	_____	\$ 0.00
	_____	_____	\$ 0.00
	_____	_____	\$ 0.00

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.

<b>Type of account (e.g., checking or savings)</b>	<b>Amount you have</b>	<b>Amount your spouse has</b>
<b>NOT APPLICABLE</b>	\$ 0.00	\$ 0.00
	\$ 0.00	\$ 0.00
	\$ 0.00	\$ 0.00

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.

<b>Person owing you or your spouse money</b>	<b>Amount owed to you</b>	<b>Amount owed to your spouse</b>
<b>NOT APPLICABLE</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>
_____	\$ 0.00	\$ 0.00
_____	\$ 0.00	\$ 0.00

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").

<b>Name</b>	<b>Relationship</b>	<b>Age</b>
<b>NOT APPLICABLE</b>	_____	_____
_____	_____	_____
_____	_____	_____

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.

	<b>You</b>	<b>Your spouse</b>
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 0.00	\$ 0.00
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)	\$ 0.00	\$ 0.00
Home maintenance (repairs and upkeep)	\$ 0.00	\$ 0.00
Food	\$ 0.00	\$ 0.00
Clothing	\$ 0.00	\$ 0.00
Laundry and dry-cleaning	\$ 0.00	\$ 0.00
Medical and dental expenses	\$ 0.00	\$ 0.00

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ 0.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$ 0.00
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0.00	\$ 0.00
Life	\$ 0.00	\$ 0.00
Health	\$ 0.00	\$ 0.00
Motor Vehicle	\$ 0.00	\$ 0.00
Other: _____	\$ 0.00	\$ 0.00
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0.00	\$ 0.00
Installment payments		
Motor Vehicle	\$ 0.00	\$ 0.00
Credit card(s)	\$ 0.00	\$ 0.00
Department store(s)	\$ 0.00	\$ 0.00
Other: _____	\$ 0.00	\$ 0.00
Alimony, maintenance, and support paid to others	\$ 0.00	\$ 0.00
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Other (specify): _____	\$ 0.00	\$ 0.00
<b>Total monthly expenses:</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>

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? 0.00

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? 0.00

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 HAVE BEEN INCARCERATED FOR THE PAST TWO YEARS. I HAVE NO ASSETS, NO INCOME, AND NO FUTURE INCOME EXPECTED**

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

Executed on: JUNE 9, 2023



(Signature)

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT  
FOR HILLSBOROUGH COUNTY, FLORIDA  
Criminal Justice and Trial Division

STATE OF FLORIDA

CASE NO.: 18-CF-011566-A

v.

VIVIAN WOODSTOCK,  
Defendant.

DIVISION: G

**ORDER GRANTING DEFENDANT'S SECOND AMENDED MOTION FOR LEAVE TO  
PROCEED WITHOUT PAYMENT OF COSTS FOR PURPOSES OF POST-  
CONVICTION**

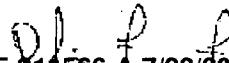
THIS MATTER is before the Court upon Defendant's "Second Amended Motion for Leave to Proceed without Payment of Costs for Purposes of Post-Conviction," filed on July 21, 2022. After reviewing Defendant's motion, the court file, and the record, the Court finds as follows:

In his motion, Defendant requests that he "may seek review of this Court's judgment and sentence without prepayment of costs or security thereof." (See Second Amended Motion for Leave to Proceed without Payment of Costs for Purposes of Post-Conviction, attached). Furthermore, Defendant requests "[t]hat the costs associated with transcribing the proceeding in this case, as designated by counsel, shall be borne by the Justice Administrative Commission." *Id.* In support of his requests, Defendant asserts that he "has attached to this motion a recent application for indigent status and [the] clerk's determination of indigency, an affidavit of attorney's fees, and a response (email) from the Justice Administrative Commission." *Id.*

After reviewing Defendant's motion, the court file, and the record, the Court finds the Clerk of Court has determined Defendant to be indigent. *Id.* **As such, the Court finds it will declare Defendant to be indigent for costs for the purposes of his direct appeal in case number 18-CF-011566-A.**

It is therefore **ORDERED AND ADJUDGED** that the Defendant's "Second Amended Motion for Leave to Proceed without Payment of Costs for Purposes of Post-Conviction" is hereby **GRANTED** in accordance with the above order.

**DONE AND ORDERED** in Chambers in Hillsborough County, Florida this \_\_\_\_ day of July, 2022.

  
18-CF-011566-A 7/22/2022 1:56:48 PM

---

**ROBIN F. FUSON**, Circuit Judge

Attachment:

Second Amended Motion for Leave to Proceed without Payment of Costs for Purposes of Post-Conviction

Copies to:

Assistant State Attorney, Division G

Robert Malove, Esq.  
200 S.E. 9th St.  
Ft. Lauderdale, FL 33316

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT  
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

STATE OF FLORIDA,  
*Plaintiff*,

CASE NO.: 18-CF-011566A

v.

VIVIAN WOODSTOCK,  
*Defendant.*

JUDGE: ROBIN F. FUSON

---

SECOND AMENDED MOTION FOR LEAVE TO PROCEED WITHOUT PAYMENT  
OF COSTS FOR PURPOSES OF POST-CONVICTION

COMES NOW the Defendant, VIVIAN WOODSTOCK, by and through undersigned  
counsel and respectfully moves this Court for an Order providing:

1. That Defendant may seek review of this Court's judgment and sentence without  
prepayment of costs or security thereof;
2. That the costs associated with transcribing the proceedings in this case, as designated by  
counsel, shall be borne by the Justice Administrative Commission.

In support of this request, Defendant has attached to this motion a recent application for  
indigent status and clerk's determination of indigency, an affidavit of attorney's fees, and a  
response (email) from the Justice Administrative Commission. *See attached.*

Respectfully submitted,

The Law Office of  
ROBERT DAVID MALOVE, PA.  
200 S. Andrew Avenue, Suite 100  
Ft. Lauderdale, Florida 33301  
(954) 861-0384

By: /s/ Robert David Malove  
Robert David Malove, Esq.  
Florida Bar No.: 407283

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that this document was electronically filed via the Florida Court's e-filing portal and that a copies were served upon the Office of the State Attorney, on this 21<sup>st</sup> day of July, 2022.

*/s/ Robert David Malove*  
Robert David Malove, Esq

STATE OF FLORIDA vs.  
**VIVIAN K WOODSTOCK**  
Defendant/Minor Child

**APPLICATION FOR CRIMINAL INDIGENT STATUS** I AM SEEKING THE APPOINTMENT OF THE PUBLIC DEFENDER

OR

 I HAVE A PRIVATE ATTORNEY OR AM SELF-REPRESENTED AND SEEK DETERMINATION OF INDIGENCE STATUS FOR COSTS

**Notice to Applicant:** The provision of a public defender/court appointed lawyer and costs/due process services are not free. A judgment and lien may be imposed against all real or personal property you own to pay for legal and other services provided on your behalf or on behalf of the person for whom you are making this application. There is a \$50.00 fee for each application filed. If the application fee is not paid to the Clerk of the Court within 7 days, it will be added to any costs that may be assessed against you at the conclusion of this case. If you are a parent/guardian making this affidavit on behalf of a minor or tax-dependent adult, the information contained in this application must include your income and assets.

1. I have  dependents. (Do not include children not living at home and do not include a working spouse or yourself.)
2. I have a take home income of \$  paid  weekly  bi-weekly  semi-monthly  monthly  yearly  
(Take home income equals salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, minus deductions required by law and other court ordered support payments)
3. I have other income paid  weekly  bi-weekly  semi-monthly  monthly  yearly: (Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")  

Social Security benefits.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Veterans' benefit.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Unemployment compensation.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Child support or other regular support from family members/spouse.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Union Funds.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Rental income.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Workers compensation.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Dividends or interest.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Retirement/pensions.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Other kinds of income not on the list.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Trusts or gifts.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>			
4. I have other assets: (Circle "Yes" and fill in the value of the property, otherwise circle "No")  

Cash.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Savings.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Bank account(s).....	Yes \$ <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Stocks/bonds.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Certificates of deposit or money market accounts.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	*Equity in Real estate (excluding homestead) Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
*Equity in Motor vehicles/Boats/.....	Yes \$ <input type="checkbox"/>	No <input checked="" type="checkbox"/>	*include expectancy of an interest in such property		
Other tangible property					

5. I have a total amount of liabilities and debts in the amount of \$ 4,000,000.00.

6. I receive: (Circle "Yes" or "No.")

Temporary Assistance for Needy Families-Cash Assistance.....	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Poverty-related veterans' benefits.....	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Supplemental Security Income (SSI).....	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>

7. I have been released on bail in the amount of \$ \_\_\_\_\_ Cash \_\_\_\_\_ Surety \_\_\_\_\_ Posted by: Self \_\_\_\_\_ Family \_\_\_\_\_ Other \_\_\_\_\_

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 27.52, F.S. commits a misdemeanor of the first degree, punishable as provided in s. 775.082, F.S. or s. 775.083, F.S. I attest that the information I have provided on this Application is true and accurate to the best of my knowledge.

Signed this 29 day of June, 2022.Date of Birth 05-15-1973Driver's license or ID number W323-876-175-0

Signature of applicant for Indigent status -

VIVIAN WOODSTOCK

520 Falkenburg Road

Tampa, FL 33619

Hillsborough County Jail

**CLERK'S DETERMINATION** Based on the information in this Application, I have determined the applicant to be  Indigent  Not Indigent The Public Defender is hereby appointed to the case listed above until relieved by the Court.Dated this 14TH day of JULY, 2022.

Lathawn Hamilton  
Clerk of the Circuit Court

This form was completed with the assistance of

Clerk/Deputy Clerk/Other authorized person

**APPLICANTS FOUND NOT INDIGENT MAY SEEK REVIEW BY ASKING FOR A HEARING TIME. Sign here if you want the judge to review the clerk's decision of not indigent.**

IN THE CIRCUIT COURT OF THE THIRTEENTH JUDICIAL CIRCUIT  
IN AND FOR HILLSBOROUGH COUNTY, FLORIDA

STATE OF FLORIDA,

*Plaintiff,*

CASE NO.: 18-CF-011566A

v.

JUDGE: ROBIN F. FUSON

VIVIAN WOODSTOCK,

*Defendant.*

**INDIGENT FOR COSTS AFFIDAVIT OF ATTORNEY'S FEES**

Pursuant to 27.52(5), Florida Statues

I, VIVIAN WOODSTOCK, I am represented by Robert David Malove, Esquire in the above entitled action. The estimated amount of fees for the attorney named above in this case is twelve thousand dollars (\$12,000.00). The fees paid or to be paid to the attorney were or are being paid by my family.

No other compensation, things of value or funds have been paid or are anticipated to be paid in the future to the attorney in this case from any other person or source.

Under penalty of perjury, I declare that I have read the foregoing Indigent for Costs Affidavit of Attorney's Fees and that the facts stated in it are true.

Date: 6-29-22

  
VIVIAN WOODSTOCK



Tami Gordon <tami@robertmalovelaw.com>

**Fwd: New IFC Case (Case # 29 CF 2018 011566 0000 XX)**

2 messages

**Katie Sebastian** <katie@robertmalovelaw.com>  
To: Tami Gordon <tami@robertmalovelaw.com>

Tue, Jul 5, 2022 at 1:28 PM

----- Forwarded message -----

From: JAC Pleadings <pleadings@justiceadmin.org>

Date: Tue, Jul 5, 2022 at 1:17 PM

Subject: RE: New IEC Case (Case # 29 CE 2018 011566 0000 XX)

To: KATIE@ROBERTMALOVELAW.COM <KATIE@robertmalovelaw.com>, JEANNETTE@ROBERTMALOVELAW.COM <JEANNETTE@robertmalovelaw.com>

Dear Mr. Malove:

The Justice Administrative Commission (JAC) has received and reviewed the Motion for Leave to Proceed Without Payment of Costs for Purposes of Post-Conviction as to the above-referenced matter. JAC will not be filing a formal response and takes no position as to your motion except JAC objects insofar as the estimated attorney fees exceed the statutory presumption of non-indigence pursuant to s. 27.52(5), F.S. JAC does not request to participate in any hearing set on the motion. You may utilize this email in lieu of a formal response and should attach it to your motion when you provide it to the court.

JAC infers you are seeking appellate costs associated with the notice appeal of the judgment and sentence filed on June 21, 2022..

Please be advised that your indigent for costs contract with JAC has expired. You will need to execute a current contract before incurring any costs in this matter. **JAC cannot process any invoice for payment until you execute this contract.**

If the Defendant is convicted, the **defense must file an accounting with the trial court within 90 days of disposition** per s. 27.52(5)(i), F.S. Failure to file this accounting will delay JAC from processing any pending due process services bills for payment.

Sincerely,

## Christian Lake

### Assistant General Counsel

**Justice Administrative Commission**

227 N. Bronough Street, Suite 2100

Tallahassee, FL 32301

Tel.: 850.488.2415

JAC Website: <https://www.justiceadmin.org>

**PLEASE NOTE:** All email is potentially available as a public record. This email or any attachments provided may contain confidential information intended for the use of the designated recipients named above. If you are not the intended recipient and have received this email in error, please notify the sender immediately by returning the email and deleting the message and be aware that any review, dissemination, distribution or copying of this communication is strictly prohibited.

**From:** [laserfiche@justiceadmin.org](mailto:laserfiche@justiceadmin.org) <[laserfiche@justiceadmin.org](mailto:laserfiche@justiceadmin.org)>

**Sent:** Tuesday, July 5, 2022 12:44 PM

**To:** Hoagland, Aimee <[aimee.hoagland@justiceadmin.org](mailto:aimee.hoagland@justiceadmin.org)>

**Subject:** New IFC Case (Case # 29 CF 2018 011566 0000 XX)

Your online submission of documents to JAC's Case Opening system has been reviewed and a new case has been opened in JAC (Case # 29 CF 2018 011566 0000 XX)

The new case identification number generated for Florida Bar No. 407283 is 832039

Justice Administrative Commission

Tel: 850 488 2415

JAC Website: <https://www.justiceadmin.org>

--  
Sincerely,

***Katie Sebastiano, Legal Assistant***

The Law Offices of

Robert David Malove, Esquire

Florida Bar Board Certified Criminal Trial Lawyer

200 S.E. 9th Street

Fort Lauderdale, FL 33316

*Helping people defend their freedom and get their lives back on track.*

Federal & State Appeals - Post-Conviction Relief

ph: 954.861.0384 | efax: 954.333-6927

**RobertMaloveLaw.com**



**Motion For Indigence Doc 168942.pdf**  
682K

**Jeannette Luciano** <jeannette@robertmalovelaw.com>  
To: Tami Gordon <tami@robertmalovelaw.com>

Tue, Jul 5, 2022 at 2:10 PM

Sincerely,

**Jeannette Luciano**  
**Administrative Assistant**

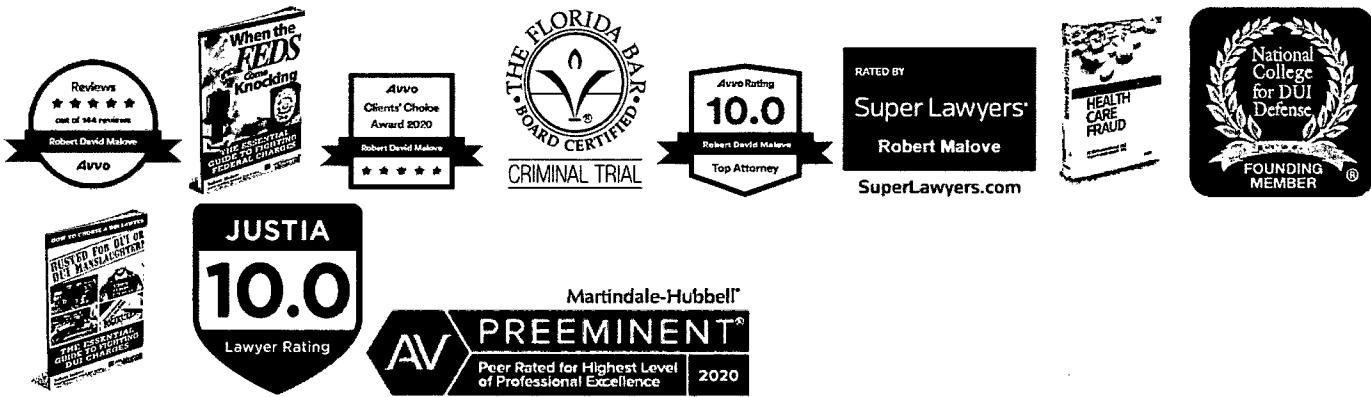
*Helping people defend their freedom and get their lives back on track.*

**The Law Offices of  
Robert David Malove, Esquire  
Florida Bar Board Certified Criminal Trial Lawyer**

DUI, State & Federal Criminal Defense, Medicare Fraud Defense,  
Sentencing Strategies, Post-Conviction Remedies and Appeals

**WE'VE MOVED! PLEASE NOTE OUR NEW ADDRESS:**

The Law Office of Robert David Malove, P.A.  
200 SE 9th Street  
Fort Lauderdale, FL 33316  
ph: (954) 861-0384 | e-fax: (954) 333-6927  
[RobertMaloveLaw.com](http://RobertMaloveLaw.com)



[Quoted text hidden]

**Motion For Indigence Doc 168942.pdf**  
682K