

No. 23-5323

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

FILED
JUN 20 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.

Don Collins Pro Se PETITIONER

(Your Name)

Rob Jeffreys et al
Andrea Tack
Daidra Matano
Brian Senodenos

VS.

— 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):

In State Court for Schuyler County, Rushville, IL (2022)

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: and Rule 83:11 and Rule 83:37

Filing Fee paid and Court Appt Counsel soon thereafter in, or
U.S. District Court, Northern District before sent to App Ct

a copy of the order of appointment is appended.

Don Collins

(Signature)

RECEIVED

JUN 27 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.

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

I, Don Collins, 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	<i>Balance Into at 7 Jun \$ 30.00 cents in July.</i>		\$ <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>
Total monthly income:	\$ <u>30.00</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

07-10-23

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
			\$ _____
			\$ _____
			\$ _____

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
			\$ _____
			\$ _____
			\$ _____

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
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

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

Home 0
Value _____

Other real estate
Value 0 _____

Motor Vehicle #1
Year, make & model 0
Value _____

Motor Vehicle #2
Year, make & model 0
Value _____

Other assets
Description 0
Value _____

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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

\$
\$
\$

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)

\$ \$

Are real estate taxes included? Yes No

Is property insurance included? Yes No

Utilities (electricity, heating fuel,
water, sewer, and telephone)

\$ \$

Home maintenance (repairs and upkeep)

\$ \$

Food

\$ \$

Clothing

\$ \$

Laundry and dry-cleaning

\$ \$

Medical and dental expenses

\$ \$

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	You	Your spouse
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>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <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>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>6</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>

I am in-custody DHS, Rushville Civil Commit Facility and have zero income. The facility trust statement enclosed show .07 on account. DHS pays no funds to us. Been here for 2 years.

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? _____

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? _____

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

Executed on: July 31, 2023

Don Collins

(Signature)

07-06-23
*****RESIDENT COPY*****

Withdraw Money

Receipt #BS1345

ILL. Treatment & Detention Facility

07/06/2023 10:10:03

ST 071 | CD 001 | OPR 003

Page 1 of 1

COLLINS,
DONALD

DHS Number : 930011

Date of Birth :

Location : E2

Cash Amount : \$13.86

Comment: CK 35574 - ERH

Commissary Balance : \$0.07

Receivable Balance : \$0.00



COLLINS

DONALD

930011

Treatment and Detention
Facility
Rushville, IL



S U P R E M E C O U R T
o f t h e
U n i t e d S t a t e s

Case No. _____

Don Collins V Rob Jeffrey's et al

07-11-23

R E P L Y T O C O U R T
f o r I n d i g e n t F o r m a n d S.C.R. 14.1(d)

Respondent Don Collins has attached Declaration proceed in Forma Pauperis. Respondent was in IDOC 16 years and transferred to DHS where currently for two years. In-custody status at DHS where no state funds or other income for support. DHS does not pay a base state pay like IDOC. DHS runs on a point cashless system where points earned through tasks and program work. These points allow commissary purchase and have no cash value. A copy of actual trust statement shows 7¢ on funds account in July 2023.

Regards SC.R. 14.1(d) is unexplainable and appears not apply to respondent as have no idea what it is requesting.

Could this court w/o legal advising a better explanation what is being ask this respondent provide, for 14.1(d). I was able to locate this rule but it states the same thing, a one sentence statement have no idea the meaning.

Don Collins, Respondent

S E R V I C E

By U.S. Mail on July 10, 2023 to U.S. Supreme Court, with attached notary for trust statement and completed Forma Pauperis form for court review.

RESPONDENT IS BEFORE COURT AS PRO SE INSTITUTIONALIZED IN STATE CUSTODY

Don Collins

DHS TREATMENT & DETENTION FACILITY
17019 County Farm Rd
Rushville, IL 62681



COLLINS

DONALD

930011

Treatment and Detention

Facility

Rushville, IL



Supreme Court
of the
United States

Case No. _____

FROM: Respondent Don Collins, PRO SE
DHS Treatment & Detention Facility
Rushville, IL 62681

07-11-23

A F F I D A V I T

Respondent under notary attached,

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

1. Respondent attached Forma Pauperis completed form.
2. Respondent also attached current trust statement of last balance on account of 07¢ and previous balance for 13.86.
3. Notary affixed as requested by court.
4. Respondent states information is true updated to date of statement July 06, 2023 provided by DHS.

N O T A R Y

Respondent Don Collins under notary this 11 day of July 2023 provides state ID Card for proof of identity.

Under seal this document is signed by Don Collins, /s/ Don Collins
at DHS Treatment & Detention Facility, 17019 County Farm Rd
Rushville, IL 62681

N O T A R Y

Notary /s/ Amanda Reische
Date 7/11/23

