

23-5370

No. _____

ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

FILED
AUG 01 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.

CHARLES ALAN DYER - PETITIONER

VS.

STATE OF OKLAHOMA AND

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The petitioner asks leave to file the attached petition for 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):

Stephens County District Court, Duncan, Oklahoma

Oklahoma Court of Criminal Appeals

United States Tenth Circuit Court of Appeals

United States Supreme Court

Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any 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.


CHARLES ALAN DYER

RECEIVED

AUG 16 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.

AFFIDAVIT OR DECLARATION

IN SUPPORT OF MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

I, **Charles Alan Dyer**, am the petitioner in the above-entitled case. I 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 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	\$20.00	\$ 0.0	\$20.00	\$ 0.0
Self-Employment	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Income from real property (such as rental income)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Interest and dividends	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Gifts	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Alimony	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Child Support	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Disability (such as social security, insurance payments)	\$ 169.0	\$ 0.0	\$ 169.0	\$ 0.0
Unemployment payments	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Public-assistance (such as welfare)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Other (specify):	\$0.0	\$ 0.0	\$ 0.0	\$ 0.0
Total monthly Income:	\$ 189.00	\$ 0.0	\$ 189.00	\$ 0.0

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
LARC	P.O. Box 260	8/202015-current	\$ 20.00

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.)

Employer	Address	Dates of Employment	Gross monthly pay
N/A	N/A	N/A	\$ 0.0
N/A	N/A	N/A	\$ 0.0
N/A	N/A	N/A	\$ 0.0

How much cash do you and your spouse have? \$ 0.0

Below, state any money you or 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
Inmate Mandatory Savings Account	\$2,550.00	\$ 0.0
N/A	\$ 0.0	\$ 0.0
N/A	\$ 0.0	\$ 0.0

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

<input type="checkbox"/> Home Value \$ 0.0	<input type="checkbox"/> Other real estate Value \$ 0.0
<input type="checkbox"/> Motor Vehicle #1 Year, make & model N/A Value \$ 0.0	<input type="checkbox"/> Motor Vehicle #2 Year, make & model N/A Value \$ 0.0
<input type="checkbox"/> Other assets	

Description N/A
Value \$ 0.0

6. State every person, business, or organization owing you or your spouse

money, and the amount owed. Person owing you or your spouse money.

	<i>Amount owed to you</i>	<i>Amount owed to your spouse</i>
N/A	\$ 0.0	\$ 0.0
N/A	\$ 0.0	\$ 0.0
N/A	\$ 0.0	\$ 0.0

7. State the person who rely on you or spouse for support. For minor children, list initials instead of names (e.g., "J.S." instated of John Smith")

Name	Relationship	Age
N/A	N/A	N/A
N/A	N/A	N/A
N/A	N/A	N/A

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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$ 0.0	\$ 0.0
Is property insurance included?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$ 0.0	\$ 0.0
Utilities (electricity, heating fuel, water, sewer, and telephone)		\$ 0.0	\$ 0.0
Home maintenance (repairs and upkeep)		\$ 0.0	\$ 0.0
Food		\$ 80.0	\$ 0.0
Clothing		\$ 0.0	\$ 0.0
Laundry and dry-cleaning		\$ 0.0	\$ 0.0
Medical and dental expenses		\$ 4.0	\$ 0.0

	You	Your Spouse
Transportation (not including motor vehicle payments)	\$ 0.0	\$ 0.0
Recreation, entertainment, newspapers, magazines, etc..	\$ 15.0	\$ 0.0
Insurance (not deducted from wages or included in mortgage payments)	\$ 0.0	\$ 0.0
Homeowner's or renter's	\$ 0.0	\$ 0.0
Life	\$ 0.0	\$ 0.0
Health	\$ 0.0	\$ 0.0
Motor Vehicle	\$ 0.0	\$ 0.0
Other	\$ 0.0	\$ 0.0
Taxes (not included from wages or included in mortgage payments)		
(specify):	\$ 0.0	\$ 0.0
Installment payments		
Motor Vehicle	\$ 0.0	\$ 0.0
Credit card(s)	\$ 0.0	\$ 0.0
Department store(s)	\$ 0.0	\$ 0.0
Other: DOC removal for court cost and mailing	\$ 10.0	\$ 0.0
Alimony, maintenance, and support paid to others	\$ 0.0	\$ 0.0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.0	\$ 0.0
Other (specify):	\$ 0.0	\$ 0.0
Total monthly expenses:	\$ 99.00	\$ 0.0

9. Do you expect any major changes to your monthly income or expenses or in your assts 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, 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? None

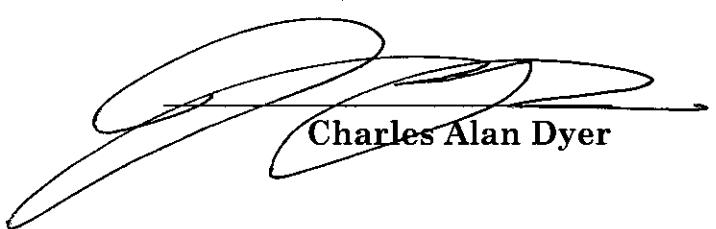
If yes, state the person's name, address, and telephone number: N/A

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

I am an incarcerated disabled veteran. Under the 14th Amendment of the U.S. Constitution, I am an indentured servant (Slave) to the State of Oklahoma. That under the rules of this Court "Rule 40" I may file this writ without cost for filing fees. If funds are required, I ask that my filing be allowed as timely and that monthly payments be arranged.

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

Executed on August 1, 2023.



Charles Alan Dyer