

23-5401

No. _____

ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

#433850 Rayshawn J. Christmas, A.K.A. Rayshawn J. Christmas

FILED
MAY 29 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.
Petitioner

VS.

Mr. Ware Sargent of extended lock-down et. al., Ms. Gaines Major Assistance to Disciplinary Board officer, Mr. Brock Warden, Mr. Guerin Warden of extended lock-down, John Bel Edwards Governor of Louisiana, Ms. Alexia Carey Social worker, Mr. Timothy Hooper Warden, Ms. Fleming Psychiatric, Ms. Clara H. Head Social worker, James LeBlanc Secretary through States Louisiana Department of Public Safety and correction services, Jeff Landry Louisiana Attorney General, 1885 N. 3rd St. P.O. Box 94005, Baton Rouge, La. 70804-0005, (225-342-7015) Email: [REDACTED]..., Phone: 225-326-6070, FAX: 225-326-6797, Website: agjefflandry.com, E-mail: constituentservices, @ag.state.la.us, GovernorJohnBelEdwards@od.louisianagov) CORRECTIONS OFFICER AT LOUISIANA
Department of Corrections (Individual and in their official RESPONSIBILITIES ET AL. Respondent
DEFENDANTS, APPELLEE

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.

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

United States District Court Western District of Louisiana Alexandria No. #1:13-CV-02595-TS-JDK
United States District Court Western District of Louisiana Alexandria No. #1:17-CV-0587-DDD-PM
United States District Court Western District of Louisiana Shreveport No. #5:19-CV-0629-TAD-MLH
United States District Court Middle District of Louisiana Baton Rouge Division No. #21-439-BAJ-EWD
In this Supreme Court of the U.S. Rayshawn Christmas. Aka. Rayshawn J. Christmas v. Jeff Jackson, et al
No. 21-6947 petition for a Writ of Certiorari was filed on January 3, 2022, and placed on the docket January 24, 2022. United States 5th Circuit Court of Appeals #22-30273)(20-30598)(20-30276)(21-30333)(21-30285)
General Order No #2019-4093-1) In this Supreme Court of the U.S. Petition for rehearing No: 21-6947)

The application for leave to proceed in forma pauperis on Appeal Pursuant to 28 USC § 1915 is granted on November 11, 2020 No #20-30598.

The application for leave to proceed in forma pauperis on Appeal Pursuant to 28 USC § 1915 is granted on July 20, 2021 No. #21-30285

The application for leave to proceed in forma pauperis on Appeal for the Trial Pursuant to 19th Judicial District Court Parish of East Baton Rouge of Louisiana Granted on January 11, 2018 No >#653-728

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: _____

By: PRO-SE Litigator Rayshawn J. Christmas
DOC#433850 #433850 Rayshawn J. Christmas

AFFIDAVIT OR DECLARATION

IN SUPPORT OF MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

RAYSHAWN J. CHRISTMAS

I, RAYSHAWN J. CHRISTMAS #433850, 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 | \$ <u>0</u> | \$ <u>0</u> | \$ <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> | \$ <u>0</u> |
| Total monthly income: | \$ <u>0</u> | \$ <u>0</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 |
|------------|------------|---------------------|------------------------|
| <i>N/A</i> | <i>N/A</i> | <i>N/A</i> | \$ <i>N/A</i> <i>0</i> |
| <i>N/A</i> | <i>N/A</i> | <i>N/A</i> | \$ <i>N/A</i> <i>0</i> |
| <i>N/A</i> | <i>N/A</i> | <i>N/A</i> | \$ <i>N/A</i> <i>0</i> |

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 |
|------------|------------|---------------------|------------------------|
| <i>N/A</i> | <i>N/A</i> | <i>N/A</i> | \$ <i>N/A</i> <i>0</i> |
| <i>N/A</i> | <i>N/A</i> | <i>N/A</i> | \$ <i>N/A</i> <i>0</i> |
| <i>N/A</i> | <i>N/A</i> | <i>N/A</i> | \$ <i>N/A</i> <i>0</i> |

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 |
|---|-----------------|------------------------|
| <i>N/A</i> | \$ <i>N/A</i> | \$ <i>N/A</i> |
| <i>N/A</i> | \$ <i>N/A</i> | \$ <i>N/A</i> |
| <i>N/A</i> | \$ <i>N/A</i> | \$ <i>N/A</i> |

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

Home
 Value *N/A*

Other real estate
 Value *N/A*

Motor Vehicle #1
 Year, make & model *N/A*
 Value *N/A*

Motor Vehicle #2
 Year, make & model *N/A*
 Value *N/A*

Other assets
 Description *N/A*
 Value *N/A*

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>0</u> | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |
| <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |
| <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</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 |
|--------------------------------|---------------|-----------|
| <u>MS JESSICA N. CHRISTMAS</u> | <u>SISTER</u> | <u>39</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>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</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>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |
| Home maintenance (repairs and upkeep) | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |
| Food | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |
| Clothing | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |
| Laundry and dry-cleaning | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |
| Medical and dental expenses | \$ <u>N/A</u> <u>0</u> | \$ <u>N/A</u> <u>0</u> |

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

See attached

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? *N/A*

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? *N/A*

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.

See attached

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

Executed on: *AUGUST #8 2023*, 20*23*

By PRO-SC LITIGATION Rayshawn J.
Christmas a.k.a. Rayshawn J. Christmas #433850
(Signature)

line 1 fmt 0 rl - shft hld chrs hld ln (-1)RESULT
.DATE E000650
* LSP . TRANSM. TRANSM . T. AMOUNT . AMOUNT .
*NUMBER NUMBER. DATE .Y. DEPOSIT .WITHDRAWL. TRANSACTION DESCRIPTION : DATE :
=====.=====.*=====.*=====.*=====.*=====.*=====.*=====.*=====.*=====.
433850 0V88AE 03/31/23 D 20.00 51COCOURT ORDER 230331
433850 0V88AE 03/31/23 D 4.18 51mcMEDICAL CO-PAY 230331
433850 0V88AE 03/31/23 D 3.00 51mcMEDICAL CO-PAY 230331
433850 0V88AE 03/31/23 D 5.00 51mcMEDICAL CO-PAY 230331
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433850 0V88AE 03/31/23 D 6.82 51IGIND GEN SUPP 230331
433850 J088DP 03/29/23 D 50.00 67JESSICA CHRISTMAS 230331 442
433850 J088DP 03/29/23 R 50.00 67JESSICA CHRISTMAS 230331 443
..... END REPORT

< NO CANTEEN INFORMATION FOUND FOR DOC 433850 . TRANSMIT AGAIN TO CONTINUE >>
TRANSACTION INQUIRY BY DOC NUMBER

DOC NUMBER : 433850

INQUIRE FROM : 10 / 01 / 22 TO : 12 / 31 / 22
MM DD YY MM DD YY

TRANSACTION LOG : 0 0=ALL LOGS
1=CANTEEN SALES
2=INCENTIVE PAY
3=PF40 REQUEST
4=PF30 REQUEST

TRANSMIT FROM HERE: (ENTER X TO CANCEL FUNCTION)

STATEMENT OF ACCOUNT
(Certified Institutional Equivalent)

I hereby certify that Rayshaun Christmas, inmate number 433850
the plaintiff herein has the following sums of money on account to his credit at LSP, the institution where he is confined:

Prison Drawing Account: \$ 0

Prison Savings Account: \$ 0

A. Cash _____

B. Bonds _____

I further certify that the average monthly deposits for the preceding six months is
\$ 16.66.

(The average monthly deposits are to be determined by adding the deposits made during a given month and dividing that total by the number of deposits made during that month. This is repeated for each of the six months. The average from each of the six months are to be added together and the total is to be divided by six.)

I further certify that the average monthly balance for the preceding six months is
\$ 18.

(The average monthly balance is to be determined by adding the deposits made during a given month and dividing that total by the number of deposits made during that month. This is repeated for each of the six months. The balance from each of the six months are to be added together and the total is to be divided by six.)

Date Certified

Daundra Boso
Signature of Authorized Officer of Institution

DATE

APR 04 2023

CERTIFIED