

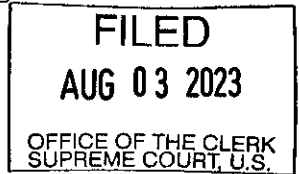
23-5562

ORIGINAL

UNITED STATES SUPREME COURT
MASSACHUSETTS SS.

CASE NO. 2023-----

PETITIONER'S VERIFIED MOTION TO PROCEED
IN FORMA PAUPERIS



The petitioner, appearing Pro Se, incarcerated in the Norfolk Prison Colony, moves this Honorable Court, pursuant to Supreme Court Rule 39(1), to allow waiver of the \$300.00 filing fee.

As grounds therefore, the petitioner is indigent and cannot afford to pay the filing fee without the deprivation of purchasing the necessary hygienic items in the Inmate Canteen, which he does to stay health.

He is also responsible for purchasing typewriter ribbons, paper, envelopes, and Correct tape to be able to file the petition in a timely manner.

WHEREFORE, the petitioner prays he is allowed to proceed In Forma Pauperis.

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY THIS
4TH DAY OF AUGUST, TWO THOUSAND TWENTY THREE,

8/23, 2023

/s/ Paul Dubois
Paul Dubois, Pro Se
Box 43,
Norfolk, MA 02056

Certificate of Service:

I hereby certify that I mailed a true copy of the above verified motion to the Attorney General, One Ashburton Place, Boston, MA 02108 on August 4, 2023.

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

I, Paul Dubois, 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	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Self-employment	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Income from real property (such as rental income)	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Interest and dividends	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Gifts	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Alimony	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Child Support	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Retirement (such as social security, pensions, annuities, insurance)	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Disability (such as social security, insurance payments)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Unemployment payments	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Public-assistance (such as welfare)	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Other (specify): _____	\$ -0-	\$ -0-	\$ -0-	\$ -0-
Total monthly income:	\$ -0-	\$ -0-	\$ -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
N/A			\$
			\$
			\$

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			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ - 0 -

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
N/A	\$	\$
	\$	\$
	\$	\$

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

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

☐ Other assets
Description No Assets
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
N/A	\$ -0-	\$ -0-
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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
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)	\$ N/A	\$ _____
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)	\$ Prisoner	\$ _____
Home maintenance (repairs and upkeep)	\$ N/A	\$ _____
Food	\$ -0-	\$ _____
Clothing	\$ -0-	\$ _____
Laundry and dry-cleaning	\$ -0-	\$ _____
Medical and dental expenses	\$ -0-	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ -0-	\$ -0-
Recreation, entertainment, newspapers, magazines, etc.	\$ -0-	\$ -0-
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ -0-	\$ -0-
Life	\$ -0-	\$ -0-
Health	\$ -0-	\$ -0-
Motor Vehicle	\$ -0-	\$ -0-
Other: <u>None</u>	\$	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>None</u>	\$ -0-	\$ -0-
Installment payments		
Motor Vehicle	\$ -0-	\$ -0-
Credit card(s)	\$ -0-	\$ -0-
Department store(s)	\$ -0-	\$ -0-
Other: <u>None</u>	\$ -0-	\$ -0-
Alimony, maintenance, and support paid to others	\$ -0-	\$ -0-
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ -0-	\$ -0-
Other (specify): <u>None</u>	\$	\$
Total monthly expenses:	\$ -0-	\$ -0-

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? _____

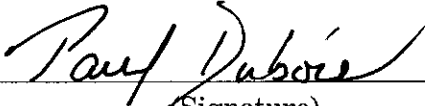
If yes, state the person's name, address, and telephone number:

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

As a prisoner incarcerated in Norfolk Prison, the State provides all my food and clothing. If my family is able to send a few dollars, I use it for hygiene products.

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

Executed on: August 23, 2023, 20__


(Signature)