

23-5778  
No. \_\_\_\_\_

ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

FILED  
SEP 01 2023

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

Larry David Davis — PETITIONER  
(Your Name)

VS.

Dexter Payne — 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):

U.S. District Court eastern District of Arkansas central Division

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: \_\_\_\_\_

, or

a copy of the order of appointment is appended.

Larry Davis  
(Signature)

RECEIVED  
OCT 12 2023  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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SEP 11 2023  
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**AFFIDAVIT OR DECLARATION  
IN SUPPORT OF MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

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

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
na	na	na	\$ na
na	na	na	\$ na
na	na	na	\$ na

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
na	na	na	\$ na
na	na	na	\$ na
na	na	na	\$ na

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

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

<input type="checkbox"/> Home Value na	<input type="checkbox"/> Other real estate Value na
<input type="checkbox"/> Motor Vehicle #1 Year, make & model na Value na	<input type="checkbox"/> Motor Vehicle #2 Year, make & model na Value na
<input type="checkbox"/> Other assets Description na Value na	

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
na	\$ na	\$ na
na	\$ na	\$ na
na	\$ na	\$ na

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
na	na	na
na	na	na
na	na	na

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)	\$ na	\$ na
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)	\$ na	\$ na
Home maintenance (repairs and upkeep)	\$ na	\$ na
Food	\$ na	\$ na
Clothing	\$ na	\$ na
Laundry and dry-cleaning	\$ na	\$ na
Medical and dental expenses	\$ na	\$ na

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

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 have been incarcerated every since Arkansas had me illegally taken from my home April 28<sup>th</sup> of 2017 in Memphis, Tenn at 686 Ayers Street 38107. and I am single

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

Executed on: August 4th, 2023

Larry David Davis  
(Signature)

**CERTIFICATE**  
(Prisoner Accounts Only)  
(To be Completed by the Institution of Incarceration)

I certify that the applicant named herein has the sum of \$ 0 on account to his/her credit at the Delta Regional institution where he/she is confined.

I further certify that the applicant likewise has the following securities to his/her credit according to the records of said institution: NYA

I further certify that during the past six months the applicant's average balance was \$ 12.59.

8-3-23

Date

Marvin Terry

Signature of Authorized Officer of Institution

Petitioner Larry D. Davis being sworn, present, he has  
read the above, State the information is true and correct

State of ARKANSAS

Chicot County



Subscribed and Swear to before me a notary Public on  
this 4th day of august 2023

Se  
Steven A. Mitchell  
notary Public

my commission expires 4-5-2028

## CALCULATION OF INITIAL PAYMENT OF FILING FEE

(To be Completed by the Institution of Incarceration)

PLAINTIFF:

LARRY DAVIS

ADC NUMBER:

# 12 3330

FEDERAL COURT CASE NUMBER (IF KNOWN): \_\_\_\_\_

Total deposits for last six (6) months: \$ 460.00

Average monthly deposit (total deposits divided by 6): \$ 76.67

Total balances for last six (6) months: \$ 75.51

Average monthly balance:  
(Total balances divided by 6) \$ 12.59

Current account balance: \$ 0

Initial payment of filing fee as of 8-3-23 : \$ 15.33

(The greater of the average monthly deposit  
Or the average monthly balance x .20)

DATE: 8-3-23

AUTHORIZED OFFICIAL

Monica Terry

(NO FILING FEE SHALL BE IN EXCESS OF  
\$350.00 FOR A CIVIL LAWSUIT  
OR  
\$505.00 FOR AN APPEAL)