

No. _____

In the Supreme Court
of the United States

MARK ANDRE GREEN,
Petitioner,

v.

UNITED STATES OF AMERICA,
Respondent.

On Petition for a Writ of Certiorari
to the United States Court of Appeals
for the Fifth Circuit

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

Jeff Daniel Clark
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CJA-Appointed Counsel for Mark Green

To the Honorable Justices of the United States Supreme Court:

NOW COMES Mark Andre Green, Petitioner, by and through Jeff Daniel Clark, his appointed counsel through the Criminal Justice Act, and respectfully requests for leave of this Court to file the attached petition for writ of certiorari from the Fifth Circuit Court of Appeals without prepayment of costs and to proceed *in forma pauperis* under Rule 29. *See* Sup. Ct. R. 29.

I.

Petitioner was granted leave to proceed *in forma pauperis* and was appointed undersigned counsel to represent him at the district court and the Fifth Circuit Court of Appeals under the Criminal Justice Act of 1964. *See* 18 U.S.C. § 3006A.

II.

A copy of the order appointing counsel is attached to this motion.

Petitioner therefore requests this Court to grant him leave to proceed *in forma pauperis*.

Respectfully submitted,

/s/ Jeff Daniel Clark
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CJA 20 APPOINTMENT OF AND AUTHORITY TO PAY COURT-APPOINTED COUNSEL (Rev. 07/17)

1. CIR./DIST./ DIV. CODE 05TXN3		2. PERSON REPRESENTED Mark Andre Green		VOUCHER NUMBER		
3. MAG. DKT./DEF. NUMBER 3:21-mj-00641-BT *SEALED* - 01		4. DIST. DKT./DEF. NUMBER		5. APPEALS DKT./DEF. NUMBER		
7. IN CASE/MATTER OF (Case Name) USA v. SEALED		8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal		9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other		
10. REPRESENTATION TYPE (See Instructions) CC						
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense.</i> 18 USC § 922 Unlawful possession of a firearm by a felon						
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS Jeffrey D. Clark 550 Reserve Street Suite 190 Southlake, TX 76092 Telephone Number: _____ (817) 953-8699			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Appointment Dates: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, OR <input type="checkbox"/> Other (See Instructions) _____ Signature of Presiding Judge or By Order of the Court 7/23/2021 Date of Order _____ Nunc Pro Tunc Date _____ Repayment or partial repayment ordered from the person represented for this service at time appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO			
14. NAME AND MAILING ADDRESS OF LAW FIRM (Only provide per instructions) <div style="border: 1px solid black; padding: 5px; text-align: center;"> NO DISCLOSURE FROM NORTHERN DISTRICT OF TEXAS FILED JUL 23 2021 CLERK, U.S. DISTRICT COURT By: _____ </div>						
CATEGORIES (Attach Itemization of services with dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH. ADJUSTED HOURS	MATH/TECH. ADJUSTED AMOUNT	ADDITIONAL REVIEW
15. In Court						
a. Arraignment and/or Plea						
b. Bail and Detention Hearings						
c. Motion Hearings						
d. Trial						
e. Sentencing Hearings						
f. Revocation Hearings						
g. Appeals Court						
h. Other (Specify on additional sheets)						
(RATE PER HOUR = \$) TOTALS:		u	u	u	u	
16. Out of Court						
a. Interviews and Conferences						
b. Obtaining and reviewing records						
c. Legal research and brief writing						
d. Travel time						
e. Investigative and other work (Specify on additional sheets)						
(RATE PER HOUR = \$) TOTALS:		u	u	u	u	
17. Travel Expenses (lodging, parking, meals, mileage, etc.)						
18. Other Expenses (other than expert, transcripts, etc.)						
19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM: _____ TO: _____		20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION		21. CASE DISPOSITION		
22. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment Number <input type="checkbox"/> Supplemental Payment Have you previously applied to the court for compensation and/or reimbursement for this case? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, were you paid? <input type="checkbox"/> YES <input type="checkbox"/> NO Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give details on additional sheets. I swear or affirm the truth or correctness of the above statements. Signature of Attorney _____ Date _____						
23. IN COURT COMP.		24. OUT OF COURT COMP.		25. TRAVEL EXPENSES		26. OTHER EXPENSES
						27. TOTAL AMT. APPR./CERT. 0
28. SIGNATURE OF THE PRESIDING JUDGE				DATE		28a. JUDGE CODE
29. IN COURT COMP.		30. OUT OF COURT COMP.		31. TRAVEL EXPENSES		32. OTHER EXPENSES
						33. TOTAL AMT. APPROVED 0
34. SIGNATURE OF CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) <i>Payment approved in excess of the statutory threshold amount.</i>				DATE		34a. JUDGE CODE

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