

23-5708
No. 5708

IN THE
SUPREME COURT OF THE UNITED STATES

EDGAR E. OLIVER -- PETITIONER 02/2023

vs.

Supreme Court, U.S.
FILED
OFFICE OF THE CLERK

FLORIDA COMMISSION ON OFFENDER REVIEW -- 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): _____

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.


(Signature)

United States Supreme Court Case No. _____

UNITED STATES SUPREME COURT

Edgar E. Oliver,)
Petitioner,)
v.) Case No.: _____
)
)
)
Florida Commission on)
Offender Review,)
Respondent/Defendant.)

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

I, Edgar E. Oliver, 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	\$None	\$None	\$None	\$None
Self-employment	\$None	\$None	\$None	\$None
Income from real property (such as rental income)	\$None	\$None	\$None	\$None
Interest and dividends	\$None	\$None	\$None	\$None
Gifts	\$None	\$None	\$None	\$None
Alimony	\$None	\$None	\$None	\$None
Child support	\$None	\$None	\$None	\$None

Retirement (such as social Security, pension, annuities, Insurance)	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>
Disability (such as social Security, Insurance payments)	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>
Unemployment payments (such as welfare)	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>
<u>Other (specify):</u>	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>
Total monthly Income:	<u>\$None</u>	<u>\$None</u>	<u>\$None</u>	<u>\$None</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
<u>None</u>	<u>None</u>	<u>None</u>	<u>None</u>

None: Petitioner has been incarcerated for such period requested.

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
<u>None</u>	<u>None</u>	<u>None</u>	<u>None</u>

None: Petitioner has never been married.

4. How much cash do you and your spouse have? N/A

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
<u>None</u>	<u>None</u>	<u>None</u>
<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>
<u>None</u>	<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>	<u>None</u>

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

<input type="checkbox"/> Home	<input type="checkbox"/> Other real estate
Value <u>None</u>	Value <u>None</u>

Motor vehicle #1
Year, make & Model:
Value None

Motor Vehicle #2
Year, make & model
Value None

Other assets
Description None
(Value) None

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owning you or your Spouse money	Amount to you	Amount owed to your spouse Spouse
<u>None</u>	<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>	<u>None</u>

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
<u>None</u>	<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>	<u>None</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>\$N/A</u>
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)	<u>\$N/A</u>	<u>\$N/A</u>
Home maintenance (repairs and upkeep)	<u>\$N/A</u>	<u>\$N/A</u>
Food	<u>\$N/A</u>	<u>\$N/A</u>
Clothing	<u>\$N/A</u>	<u>\$N/A</u>
Laundry and dry-cleaning	<u>\$N/A</u>	<u>\$N/A</u>
Medical and dental expenses	<u>\$N/A</u>	<u>\$N/A</u>
Transportation (not including motor vehicle payments)	<u>\$N/A</u>	<u>\$N/A</u>
Recreation, entertainment, newspapers, Magazines, et.	<u>\$N/A</u>	<u>\$N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		

Homeowner's or renter's:	<u>\$N/A</u>	<u>\$N/A</u>
Life:	<u>\$N/A</u>	<u>\$N/A</u>
Health:	<u>\$N/A</u>	<u>\$N/A</u>
Motor Vehicle" Other:	<u>\$N/A</u>	<u>\$N/A</u>
Taxes (not deducted from wages or included in mortgage payments) (specify):	<u>\$N/A</u>	<u>\$N/A</u>
Installment payments	<u>\$N/A</u>	<u>\$N/A</u>
Motor Vehicle:	<u>\$N/A</u>	<u>\$N/A</u>
Credit card (name):	<u>\$N/A</u>	<u>\$N/A</u>
Department store (name):	<u>\$N/A</u>	<u>\$N/A</u>
Other:	<u>\$N/A</u>	<u>\$N/A</u>
Alimony, maintenance, and support		
Paid to others	<u>\$N/A</u>	<u>\$N/A</u>
Regular expenses for operation of business, Profession, or farm (attach detailed statement)		
Other (specify):	<u>\$N/A</u>	<u>\$N/A</u>
Total monthly expenses:	<u>N/A</u>	<u>\$N/A</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.
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? \$ None
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 costs of this case. Petitioner has been presently incarcerated for the last Forty-eight (48) years of life in Florida Department of Corrections.

I declare under penalty of perjury that the foregoing is true and correct.
Executed on: October 2, 2023.

/s/ Edgar Oliver
(Signature)

**CERTIFICATE OF COMPLIANCE WITH TYPE-VOLUME LIMITS
TYPEFACE REQUIREMENTS, AND TYPE-STYLED REQUIREMENTS**

Check the appropriate box in section 1, and check the box in section 2

1. Type-Volume

- This document complies with the word limit of FRAP 27(d)(2)(A)
Because, excluding the parts of the document exempted by FRAP 32(f),
- This document contains 1,116 words.

2. Type fact and Type-Style

- This document complies with the typeface requirements of FRAP 32(a)(5)
and the type -style requirement of FRAP 32 (a)(6)

(s) _____

Edgar E. Oliver, DC#047716

Dated: October 2, 2023