

23-5804

No. USA 1122-14330 ORIGINAL

IN THE  
SUPREME COURT OF THE UNITED STATES

FILED  
SEP 13 2023

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

Joseph Alexander Clarke — PETITIONER  
(Your Name)

VS.

Adams, Et Al — 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):

Northern District of Georgia - Atlanta Division, U.S. District Court: Federal Court

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.

*By: Joseph Alexander Clarke, Esquire*  
(Signature)

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

I, Joseph Alomar Clark, 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.

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
Employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Self-employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Gifts	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Child Support	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>Commissionary</u>	\$ <u>320.</u>	\$ <u>N/A</u>	\$ <u>320.00</u>	\$ <u>N/A</u>
<b>Total monthly income:</b>	<b>\$ <u>320.00</u></b>	<b>\$ <u>N/A</u></b>	<b>\$ <u>320.00</u></b>	<b>\$ <u>N/A</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
NONE	N/A	N/A	\$ N/A
None	N/A	N/A	\$ N/A
None	N/A	N/A	\$ 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
NONE	N/A	N/A	\$ N/A
None	N/A	N/A	\$ N/A
NONE	N/A	N/A	\$ N/A

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
NONE	\$ NONE	\$ N/A
None	\$ None	\$ N/A
None	\$ None	\$ 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 NONE

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

Motor Vehicle #2  
 Year, make & model None  
 Value N/A

Other assets  
 Description N/A  
 Value 0

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>None</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>None</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>None</u>	\$ <u>N/A</u>	\$ <u>N/A</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>None</u>	<u>N/A</u>	<u>N/A</u>
<u>None</u>	<u>N/A</u>	<u>N/A</u>
<u>None</u>	<u>N/A</u>	<u>N/A</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>None</u>	\$ <u>N/A</u>
Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>None</u>	\$ <u>N/A</u>
Home maintenance (repairs and upkeep)	\$ <u>None</u>	\$ <u>N/A</u>
Food	\$ <u>None</u>	\$ <u>N/A</u>
Clothing	\$ <u>None</u>	\$ <u>N/A</u>
Laundry and dry-cleaning	\$ <u>None</u>	\$ <u>N/A</u>
Medical and dental expenses	\$ <u>None</u>	\$ <u>N/A</u>

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

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

Pro-se (Propria persona)

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:

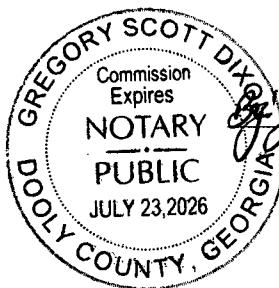
N/A

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

Incarceration for Past Seven Years (7)

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

Executed on: October 3rd, 2023



*All Rights Reserved  
By Joseph Alexander Laree, Beneficiary*  
(Signature)

*10-3-23*  
*JNL*

Account Statement

CLARKE, JOSEPH

Printed By: DYKES, HEATHER

GDC ID: 1002736404

Spending Amount	Reserved Amount	Stimulus Amount	Receipts On Hold	Funds Balance	Obligations/Court Charges
\$28.63	\$10.00	\$0.00	\$0.00	\$38.63	\$0.00

RECEIPTS					
Receipt Date	Transaction ID	Receipt Type	Receipt Details	Receipt Amount	
10/01/2023	24542074	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 161582864	\$80.00	
09/25/2023	24521494	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 161361622	\$65.00	
09/18/2023	24501715	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 161153255	\$80.00	
09/11/2023	24478419	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 160918013	\$80.00	
09/03/2023	24454807	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 160662637	\$80.00	
08/28/2023	24432251	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 160413847	\$80.00	
08/21/2023	24410674	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 160188636	\$80.00	
08/14/2023	24387926	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 159949326	\$80.00	
08/07/2023	24367318	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 159722797	\$80.00	
07/31/2023	24342757	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 159439606	\$80.00	
07/24/2023	24322407	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 159210581	\$80.00	
07/17/2023	24299804	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 158968187	\$80.00	
07/10/2023	24277964	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 158718110	\$80.00	
07/03/2023	24255658	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 158446138	\$79.00	
06/26/2023	24232758	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 158181554	\$74.00	
06/18/2023	24211718	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 157924452	\$80.00	
06/06/2023	24170362	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 157418281	\$80.00	
05/29/2023	24145047	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 157124094	\$80.00	
05/21/2023	24122699	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 156872206	\$80.00	
05/15/2023	24105407	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 156659045	\$80.00	
05/07/2023	24080177	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 156374695	\$80.00	
05/01/2023	24058585	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 156091207	\$80.00	
04/24/2023	24035048	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 155816616	\$75.00	
04/17/2023	24018100	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 155603594	\$80.00	
04/10/2023	23994448	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 155343250	\$75.00	
04/03/2023	23972081	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 155066675	\$20.00	
03/27/2023	23950770	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 154800419	\$60.00	
03/27/2023	23949230	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 154792950	\$60.00	
03/20/2023	23926874	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 154537321	\$80.00	
03/13/2023	23904041	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 154270043	\$80.00	
03/06/2023	23884717	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 154022343	\$80.00	
02/27/2023	23859720	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 153700066	\$25.00	
02/12/2023	23808981	JPAY DEPOSIT RECEIPT	JPAY - SMITH, CARMEN - 153104340	\$120.00	

Account Statement

20 Total Pages

**PLAINTIFF/PETITIONER IS REQUIRED TO SUBMIT WITH THIS AFFIDAVIT AND AUTHORIZATION A CERTIFIED COPY OF HIS/HER INMATE ACCOUNT STATEMENT FOR THE SIX-MONTH PERIOD IMMEDIATELY PRECEDING THE FILING OF THIS COMPLAINT.**

**CERTIFICATE**

I hereby certify that the plaintiff/petitioner herein has a current balance of \$ 28.63 in his/her inmate account at the Dooly State Prison Institution. Plaintiff has an average monthly balance for the preceding six months of \$ 358.02, and the average monthly deposits to said account for the preceding six months are \$ 358.02. I further certify that the plaintiff has the following assets to his/her credit according to the records of this institution:

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I further certify that the attached account statement accurately reflects Plaintiff's account balance and account activity for the past six months

10/4/23  
Date

Heather Agnes) Financial Operations  
Authorized Officer of Institution Generalist II

**RECEIVED**  
OCT 04 2023  
DOOLY STATE PRISON  
BUSINESS OFFICE