

23-5972
No. _____

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

FILED
JUL 18 2023
OFFICE OF THE CLERK
SUPREME COURT, U.S.

Barney Adrian Dunlap — PETITIONER
(Your Name)

VS.

David Mitchell — 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. Supreme Court, U.S. Court of Appeals, Fourth circuit

U.S. District Court, Western District North Carolina

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.

Barney A. Dunlap
(Signature)

RECEIVED
NOV - 7 2023
OFFICE OF THE CLERK
SUPREME COURT, U.S.

RECEIVED
OCT 11 2023
OFFICE OF THE CLERK
SUPREME COURT, U.S.

RECEIVED
AUG 22 2023
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SUPREME COURT, U.S.

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

I, Barney Dunlap, 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>75.00</u>	\$ <u>N.A.</u>	\$ <u>75.00</u>	\$ <u>N.A.</u>
Self-employment	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Interest and dividends	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Gifts	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Alimony	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Child Support	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Unemployment payments	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>75.00</u>	\$ <u>NA</u>	\$ <u>75.00</u>	\$ <u>NA</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
NC Adult Corrections	1255 Prison Camp Rd. Whiteville, N.C.	2-7-2023 - Present	\$ 55.00
NC Adult Corrections	Alexander, Taylorsville	2-21-21 to 1-27-23	\$ 30.00
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? \$ 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
Trust Fund Account, Whiteville Corr. Inst.	\$ 3850.00	\$ 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.

Home

Value NA

Other real estate

Value NA

Motor Vehicle #1

Year, make & model NA

Motor Vehicle #2

Year, make & model NA

Value NA

Value NA

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	\$ 45.00	\$ NA
Clothing	\$ 0	\$ NA
Laundry and dry-cleaning	\$ 0	\$ NA
Medical and dental expenses	\$ 10.00	\$ NA

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>NA</u>	\$ <u>NA</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>10.00</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>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <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>Postage stamps</u>	\$ <u>10.00</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>
Total monthly expenses:	\$ <u>75.00</u>	\$ <u>NA</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? _____

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 trying to get an attorney, but as the court can see, I do not have enough money to hire an attorney. However, if this court determines I am not in forma pauperis, please allow me enough time to get a money order processed.

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

Executed on: August 13, 2023, Resubmitted and,

Executed on: September 17, 2023, Resubmitted and,

Executed on: October 27, 2023, Barney A. Dunly
(Signature)

IBSR140 (60)

NORTH CAROLINA DEPARTMENT OF ADULT CORRECTION
 TRUST FUND ACCOUNT STATEMENT
 FACILITY: 4355 - COLUMBUS CI
 FOR: 10/09/23 - 10/16/23

10/16/23
 18:11:00
 PAGE 378

ACCT. NAME: DUNLAP, BARNEY A.
 BED: MADM-018

ACCT#: 0864594
 TYPE: INMATE

ENDING BALANCE 10/16/23 \$ 3,845.46 INCLUDES CANTEEN LIMIT OF \$60.00

BATCH			REFERENCE				
DATE	NBR.	TYPE	NUMBER	FACL	+/-	AMOUNT	BALANCE
10/16/23	056	ENTERPRISE PAY	20231014IC01	4355	+	\$ 21.06	\$ 3,845.46
10/15/23	016	CASHLS CANTEEN-I	00270	4355	-	\$ 4.74	\$ 3,824.40
10/14/23	018	CASHLS CANTEEN-I	00428	4355	-	\$ 0.73	\$ 3,829.14
10/12/23	035	CASHLS CANTEEN-I	00433	4355	-	\$ 3.08	\$ 3,829.87
10/11/23	027	CASHLS CANTEEN-I	00629	4355	-	\$ 0.78	\$ 3,832.95
10/09/23	041	ENTERPRISE PAY	20231007IC01	4355	+	\$ 20.12	\$ 3,833.73
10/09/23	035	CASHLS CANTEEN-I	00701	4355	-	\$ 7.34	\$ 3,813.61
10/09/23	011	CASHLS CANTEEN-I	00373	4355	-	\$ 1.77	\$ 3,820.95
						BEGINNING BALANCE	\$ 3,822.72

THIS STATEMENT SHOWS DEPOSITS AND WITHDRAWALS THAT OCCURRED
 BETWEEN 10/09/2023 AT 01:01:01 AND 10/16/2023 AT 18:11:00.

ENDING BALANCE IS THE BALANCE AS OF MONDAY, OCTOBER 16, 2023 AT 18:11:00.