

No. 23-6014

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S.
FILED

NOV - 9 2023

OFFICE OF THE CLERK

CURTIS CONWAY BAILEY PETITIONER
(Your Name)

VS.

BRYAN MORRISON, WARDEN 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):

UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF
MICHIGAN; 2023 U.S. DIST. LEXIS 23294 (FEB. 10, 2023)

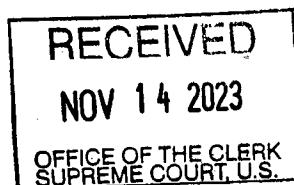
☐ Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

☐ 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.



Curtis Bailey
(Signature)

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

I, CURTIS BAILEY, 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>17.64</u> | \$ <u>N/A</u> | \$ <u>17.64</u> | \$ <u>N/A</u> |
| Self-employment | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Income from real property (such as rental income) | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Interest and dividends | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Gifts | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Alimony | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Child Support | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Retirement (such as social security, pensions, annuities, insurance) | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Disability (such as social security, insurance payments) | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Unemployment payments | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Public-assistance (such as welfare) | \$ <u>0.00</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Other (specify): <u>FAMILY</u> | \$ <u>234.57</u> | \$ <u>N/A</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| <u>FROM 5/1/23 TO 11/3/23</u> | | | | |
| Total monthly income: | \$ <u>252.21</u> | \$ <u>N/A</u> | \$ <u>17.64</u> | \$ <u>N/A</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 |
|----------|----------|---------------------|-------------------|
| MDOL | LAKELAND | 10/21/22 - 11/9/23 | \$ 17.64 |
| | | | \$ |
| | | | \$ |

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 |
|----------|---------|---------------------|-------------------|
| N/A | N/A | N/A | \$ N/A |
| | | | \$ |
| | | | \$ |

4. How much cash do you and your spouse have? \$ _____
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 |
|---|-----------------|------------------------|
| PRISON TRUST ACCOUNT | \$ 410.35 | \$ N/A |
| | \$ | \$ N/A |
| | \$ | \$ 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 _____

☐ Other real estate
Value _____

☐ Motor Vehicle #1
Year, make & model _____
Value _____

☐ Motor Vehicle #2
Year, make & model _____
Value _____

☐ Other assets
Description _____
Value _____

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>0.00</u> | \$ <u>N/A</u> |
| <u> </u> | \$ <u> </u> | \$ <u>N/A</u> |
| <u> </u> | \$ <u> </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> </u> | <u> </u> | <u> </u> |
| <u> </u> | <u> </u> | <u> </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>0.00</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>0.00</u> | \$ <u>N/A</u> |
| Home maintenance (repairs and upkeep) | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Food | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Clothing | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Laundry and dry-cleaning | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Medical and dental expenses | \$ <u>0.00</u> | \$ <u>N/A</u> |

| | You | Your spouse |
|---|----------------|---------------|
| Transportation (not including motor vehicle payments) | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Recreation, entertainment, newspapers, magazines, etc. | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Insurance (not deducted from wages or included in mortgage payments) | | |
| Homeowner's or renter's | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Life | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Health | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Motor Vehicle | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Other: <u>NONE</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Taxes (not deducted from wages or included in mortgage payments) | | |
| (specify): <u>NONE</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Installment payments | | |
| Motor Vehicle | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Credit card(s) | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Department store(s) | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Other: <u>NONE</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Alimony, maintenance, and support paid to others | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Regular expenses for operation of business, profession, or farm (attach detailed statement) | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Other (specify): <u>NONE</u> | \$ <u>0.00</u> | \$ <u>N/A</u> |
| Total monthly expenses: | \$ <u>0.00</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? _____

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 AM A PRISONER INCARCERATED IN THE MICHIGAN DEPARTMENT OF CORRECTIONS. MY PRISON LABOR JOB PAYS ME \$0.84 PER DAY AND I AVERAGE 21 DAYS OF WORK EACH MONTH, GIVING ME \$17.64 TO SPEND EACH MONTH.

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

Executed on: NOVEMBER _____, 2023

Clifford Banks
(Signature)

FEDERAL COURT

Prisoner-Plaintiff/Petitioner/Appellant name and number
Curtis Bailey #868268

v

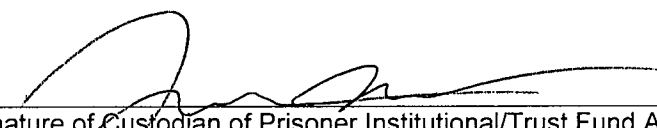
Defendant's/Respondent's/Appellee's name
Warden Bryan Morrison

CERTIFICATE OF PRISONER INSTITUTIONAL/TRUST FUND ACCOUNT ACTIVITY

I am employed by the Michigan Department of Corrections at the facility identified below, at which the prisoner identified as Plaintiff/Petitioner/Appellant is currently incarcerated.

Attached is a computer printout which accurately reflects the current spendable balance and all activity within this prisoner's account during the preceding six months or, if the prisoner has been incarcerated for less than six months, for the period of incarceration. Code "C" on the printout represents a withdrawal from the account and code "D" represents a deposit to the account. The attached printout reflects, for the reported period, an average monthly account deposit (i.e., total deposits divided by number of months) of \$294.16, an average monthly account balance (i.e., total deposits minus total withdrawals divided by number of months) of \$-8.98. There is a current spendable account balance of \$410.35.

Date: 11/3/23



Signature of Custodian of Prisoner Institutional/Trust Fund Account

Lakeland Correctional Facility
Correctional Facility

Offender Information

Offender Number: 0868268 Institution: LCF Living Unit: F2 Primary Balance: \$410.35
 Offender Name: Bailey, Curtis Conway Housing Facility: LCF Cell: 098 Available Balance: \$410.35
 Account Status: Open Tier: F2 Bed: Bot

Primary Trust Transactions

| Date | Transaction Type | Payer / Paid To | Voucher Number | Deposit | Expense | Balance | Loc Code |
|------------------------|----------------------------|------------------------------|---------------------|----------|------------|----------|----------|
| 05/01/2023 | | | | | | \$464.22 | |
| 05/02/2023 02:50:14 PM | Dental Co-Pay Disbursement | Health Care Co-Pay | DEN LCF DOS 4.11.23 | | (\$5.00) | \$459.22 | LCF |
| 05/03/2023 05:10:12 AM | GTL | Sennie McKinley | | \$50.00 | | \$509.22 | COF |
| 05/09/2023 08:36:48 AM | Legal Stamps | LCF Institutional Services | LCF Lgl Stp 5.9.23 | | (\$0.60) | \$508.62 | LCF |
| 05/09/2023 08:36:59 AM | Legal Stamps | LCF Institutional Services | LCF Lgl Stp 5.9.23 | | (\$0.60) | \$508.02 | LCF |
| 05/11/2023 01:31:27 AM | Commissary Sale | Keefe Commissary | C105033647 | | (\$28.38) | \$479.64 | LCF |
| 05/12/2023 07:04:17 AM | LCF-Institutional Services | 500 - Institutional Services | | \$9.24 | | \$488.88 | LCF |
| 05/12/2023 07:40:16 PM | Kiosk Request | JPay Inc. | | | (\$14.56) | \$474.32 | COF |
| 05/16/2023 12:57:36 PM | Vendor Refund | Union Supply Group | | \$44.41 | | \$518.73 | COF |
| 05/18/2023 01:31:32 AM | Commissary Sale | Keefe Commissary | C105033647 | | \$1.00 | \$519.73 | LCF |
| 05/25/2023 01:31:03 AM | Commissary Sale | Keefe Commissary | C105056314 | | (\$91.96) | \$427.77 | LCF |
| 05/25/2023 01:16:25 PM | Mike's Better Shoes Disb. | Mikes Better Shoes | boots | | (\$152.08) | \$275.69 | LCF |
| 05/27/2023 05:10:12 AM | GTL | cheryl viar | | \$110.00 | | \$385.69 | COF |
| 06/06/2023 01:31:23 AM | Commissary Sale | Keefe Commissary | C105056314 | | \$1.54 | \$387.23 | LCF |
| 06/08/2023 01:31:15 AM | Commissary Sale | Keefe Commissary | C105077647 | | (\$113.03) | \$274.20 | LCF |
| 06/10/2023 05:10:12 AM | GTL | Sennie McKinley | | \$100.00 | | \$374.20 | COF |
| 06/14/2023 07:36:17 AM | LCF-Institutional Services | 500 - Institutional Services | | \$8.82 | | \$383.02 | LCF |
| 06/17/2023 01:30:57 AM | Commissary Sale | Keefe Commissary | C105077647 | | \$3.45 | \$386.47 | LCF |
| 06/20/2023 10:51:26 AM | Mike's Better Shoes Disb. | Mikes Better Shoes | shoes | | (\$89.48) | \$296.99 | LCF |
| 06/21/2023 05:10:11 AM | GTL | cheryl viar | | \$137.00 | | \$433.99 | COF |
| 06/22/2023 01:31:17 AM | Commissary Sale | Keefe Commissary | C105100715 | | (\$88.77) | \$345.22 | LCF |
| 06/25/2023 05:10:10 AM | GTL | cheryl viar | | \$295.00 | | \$640.22 | COF |
| 07/05/2023 05:10:09 AM | GTL | Sennie McKinley | | \$80.00 | | \$720.22 | COF |
| 07/06/2023 01:31:00 AM | Commissary Sale | Keefe Commissary | C105121074 | | (\$124.43) | \$595.79 | LCF |
| 07/10/2023 02:42:05 PM | Dental Co-Pay Disbursement | Health Care Co-Pay | LCF DEN DOS 6.16.23 | | (\$5.00) | \$590.79 | LCF |
| 07/15/2023 01:30:55 AM | Commissary Sale | Keefe Commissary | C22138948 | | (\$127.63) | \$463.16 | LCF |
| 07/15/2023 01:30:55 AM | Commissary Sale | Keefe Commissary | C105121074 | | \$11.20 | \$474.36 | LCF |
| 07/16/2023 07:40:11 PM | Kiosk Request | JPay Inc. | | \$9.24 | (\$15.66) | \$458.70 | COF |
| 07/17/2023 07:26:45 AM | LCF-Institutional Services | 500 - Institutional Services | | | | \$467.94 | LCF |
| 07/17/2023 07:40:11 PM | Kiosk Request | JPay Inc. | | | (\$10.99) | \$456.95 | COF |
| 07/18/2023 04:04:28 PM | Special Project/Fundraiser | LCF PBF Fundraiser | LCF Fundraiser 7/18 | | (\$13.50) | \$443.45 | LCF |

Primary Trust Transactions

| Date | Transaction Type | Payer / Paid To | Voucher Number | Deposit | Expense | Balance | Loc Code |
|------------------------|----------------------------|------------------------------|----------------------|------------|--------------|----------|----------|
| 07/20/2023 01:31:07 AM | Commissary Sale | Keefe Commissary | C105143200 | | (\$124.95) | \$318.50 | LCF |
| 07/27/2023 01:31:01 AM | Commissary Sale | Keefe Commissary | C105143200 | | \$11.72 | \$330.22 | LCF |
| 07/30/2023 07:40:11 PM | Kiosk Request | JPay Inc. | | | (\$7.49) | \$322.73 | COF |
| 08/03/2023 01:30:58 AM | Commissary Sale | Keefe Commissary | C105163825 | | (\$124.69) | \$198.04 | LCF |
| 08/04/2023 05:10:13 AM | GTL | Sennie McKinley | | \$50.00 | | \$248.04 | COF |
| 08/08/2023 08:25:50 AM | GTL | cheryl viar | | \$300.00 | | \$548.04 | COF |
| 08/09/2023 05:10:12 AM | GTL | cheryl viar | | \$300.00 | | \$848.04 | COF |
| 08/14/2023 07:13:20 AM | LCF-Institutional Services | 500 - Institutional Services | | \$10.92 | | \$858.96 | LCF |
| 08/14/2023 07:13:20 AM | LCF-Institutional Services | 500 - Institutional Services | | \$3.36 | | \$862.32 | LCF |
| 08/17/2023 01:31:11 AM | Commissary Sale | Keefe Commissary | C105186813 | | (\$124.42) | \$737.90 | LCF |
| 08/28/2023 10:59:36 AM | JL Marcus Disbursement | Jack L Marcus | fan, cap, boxers | | (\$72.38) | \$665.52 | LCF |
| 08/31/2023 01:31:15 AM | Commissary Sale | Keefe Commissary | C105209134 | | (\$80.10) | \$585.42 | LCF |
| 08/31/2023 08:21:03 AM | Legal Stamps | LCF Institutional Services | LCF Lgl Pst 8.31.23 | | (\$11.35) | \$574.07 | LCF |
| 09/09/2023 05:10:12 AM | GTL | Sennie McKinley | | \$50.00 | | \$624.07 | COF |
| 09/12/2023 01:32:29 AM | Commissary Sale | Keefe Commissary | C105228224 | | (\$59.84) | \$564.23 | LCF |
| 09/13/2023 11:00:38 AM | UPS Charges | LCF Institutional Services | LCF UPS 9.13.23 | | (\$11.83) | \$552.40 | LCF |
| 09/13/2023 03:20:52 PM | Legal Copies Disbursement | LCF PBF Copies | LCF LGL COPY 8.29.23 | | (\$15.20) | \$537.20 | LCF |
| 09/15/2023 09:32:20 AM | LCF-Institutional Services | 500 - Institutional Services | | \$18.48 | | \$555.68 | LCF |
| 09/28/2023 11:13:26 PM | Commissary Sale | Keefe Commissary | C65615 | | (\$111.07) | \$444.61 | LCF |
| 09/30/2023 07:40:11 PM | Kiosk Request | JPay Inc. | | | (\$3.19) | \$441.42 | COF |
| 10/01/2023 07:40:10 PM | Kiosk Request | JPay Inc. | | | (\$15.98) | \$425.44 | COF |
| 10/05/2023 05:10:11 AM | GTL | Sennie McKinley | | \$65.00 | | \$490.44 | COF |
| 10/13/2023 09:47:47 AM | LCF-Institutional Services | 500 - Institutional Services | | \$18.48 | | \$508.92 | LCF |
| 10/13/2023 11:09:18 PM | Commissary Sale | Keefe Commissary | C86405 | | (\$40.13) | \$468.79 | LCF |
| 10/17/2023 07:40:12 PM | Kiosk Request | JPay Inc. | | | (\$15.93) | \$452.86 | COF |
| 10/18/2023 07:40:10 PM | Kiosk Request | JPay Inc. | | | (\$15.91) | \$436.95 | COF |
| 10/21/2023 05:10:10 AM | GTL | Sennie McKinley | | \$25.00 | | \$461.95 | COF |
| 10/27/2023 11:08:48 PM | Commissary Sale | Keefe Commissary | C107963 | | (\$131.60) | \$330.35 | LCF |
| 11/03/2023 05:10:12 AM | GTL | Sennie McKinley | | \$80.00 | | \$410.35 | COF |
| 11/03/2023 | | | | \$1,764.95 | (\$1,818.82) | \$410.35 | |

Savings

| Date | Deposit | Expense | Balance | Loc Code |
|-------------|---------|---------|---------|----------|
| 05/01/2023 | | | \$0.00 | |
| No Activity | | | | |
| 11/03/2023 | \$0.00 | \$0.00 | \$0.00 | |

Holds - Current as of Date and Time of Report

| Date Held | Hold Type | Notes | Amount |
|-------------|-----------|-------|--------|
| No Activity | | | |

Remaining Obligations - Current as of Date and Time of Report

| Description | Paid To | Max Per Period | Ordered | Transfer | Outside Source | Held | Paid | Written Off | Remaining | Total |
|--------------------------|---------|----------------|---------|----------|----------------|------|------|-------------|-----------|--------|
| No Remaining Obligations | | | | | | | | | | |
| Total: | | | | | | | | | | \$0.00 |