

92-6848
NO. 23A199

IN THE
Supreme COURT OF THE UNITED STATES

FILED

DEC 01 2023

OFFICE OF THE CLERK
SUPREME COURT, U.S.

ORIGINAL

STEWART C. SMITH,

Petitioner

v.

LAUREL HARRY, Superintendent - SCI Camp Hill, ET AL,
Respondent

MOTION FOR LEAVE TO PROCEED IN FORMA POVERA

Now comes Stewart Smith hereby moves this court to proceed in forma pauperis and in support thereof avers as follows:

1. He is currently in SCI Camp Hill and has been since April 126, 2013, as an innocent man.
2. He has been granted in forma pauperis on numerous occasions in the courts below, both federal and state courts.
3. He relies on gifts from family, has no employment, and averages 110 dollars monthly. See, Attached Notarized inmate account statement in support thereof.

Wherefore, petitioners pray this court grant in forma pauperis.
I AM INNOCENT


Stewart C. Smith

CERTIFICATE OF SERVICE

I, Stewart Smith, petitioner, do hereby certify that the above motion to proceed in forma pauperis was served via first class U.S. postal service, along with writ of citation and appurtenant exhibits on the person below:

Francis J. Chando, DA

Monroe County District Attorney's Office
101 Market St.
Harrisburg PA. 17101

Declaro under penalty of perjury.

See signed back slips in Support Sheet Respectfully,


Stewart Smith

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

I, Stewart Smith, 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	\$ 0	\$ 0	\$ 0	\$ 0
Self-employment	\$ 0	\$ 0	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 0
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ 0	\$ 0	\$ 0
Disability (such as social security, insurance payments)	\$ 0	\$ 0	\$ 0	\$ 0
Unemployment payments	\$ 0	\$ 0	\$ 0	\$ 0
Public-assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0
Other (specify): <u>gifts</u>	\$ 150	\$ 0	\$ 0	\$ 0
Total monthly income:	<u>\$ 150</u>	\$ 0	<u>\$ 150</u>	\$ 0

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>n/a</u>			\$
			\$
			\$

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>n/a</u>			\$
			\$
			\$

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
<u>none</u>	\$	\$
	\$	\$
	\$	\$

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

Home
 Value none

Other real estate
 Value none

Motor Vehicle #1
 Year, make & model none
 Value _____

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

Other assets
 Description none
 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>none</u>	\$ <u>none</u>
	\$ <u> </u>	\$ <u> </u>
	\$ <u> </u>	\$ <u> </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>		

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>none</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> </u>	\$ <u> </u>
Home maintenance (repairs and upkeep)	\$ <u> </u>	\$ <u> </u>
Food	\$ <u> </u>	\$ <u> </u>
Clothing	\$ <u> </u>	\$ <u> </u>
Laundry and dry-cleaning	\$ <u> </u>	\$ <u> </u>
Medical and dental expenses	\$ <u> </u>	\$ <u> </u>

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

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? N/A

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? N/A

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.

Been in prison over 10 years, mother passed away, only earn roughly 15 dollars a month from State prison and depend on family gifts of 100-150 monthly.

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

Executed on: January 16, 2024

S. G. Smith
S. G. Smith

(Signature)

Attached inmate account for
past 12 months.

I am innocent and the State of Pennsylvania is
corrupt and will do whatever it wants to lock up innocent
people.

CERTIFICATE OF NOTARIAL ACT

Signed and Sworn to before me on this
January 22, 2024 by Dewart Smith

Commonwealth of Pennsylvania County of Cumberland
See Attached Account Statement for year of 2023 from
institution SCI Camp Hill Exhibit A

Mychele Criley
notary public

