

No. _____

23-7442

ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

FILED

MAR 06 2024

OFFICE OF THE CLERK
SUPREME COURT, U.S.

Michael P. Farley — PETITIONER
(Your Name)

VS.

Anthony Wills — 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.

Michael P. Farley

(Signature)

RECEIVED

MAR 12 2024

OFFICE OF THE CLERK
SUPREME COURT, U.S.

Inmate: B86997 Farley, Michael P.

Housing Unit: WIL-04-D -24

Date	Source	Transaction Type	Batch	Reference #	Description	Amount	Balance
						Beginning Balance:	142.67
08/25/23	Mail Room	16 GTL	237200	21665751731876	Inanen, Donna	120.00	262.67
08/25/23	Disbursements	80 Postage	2373192	Chk #164217	56474, Reserve Accou, 08/24/2023	-2.07	260.60
08/26/23	Mail Room	16 GTL	238200	21665821084197	Farley, Jim	100.00	360.60
08/29/23	Point of Sale	60 Commissary	2417199	1133661	Commissary	-127.43	233.17
09/08/23	Disbursements	80 Postage	2513209	Chk #164345	56709, Reserve Accou, 09/06/2023	-1.59	231.58
09/12/23	Payroll	20 Payroll Adjustment	2551192		P/R month of 8 2023	13.00	244.58
09/15/23	Point of Sale	60 Commissary	2587195	1135342	Commissary	-129.16	115.42
09/28/23	Mail Room	16 GTL	271200	21699085564454	Farley, Jim	100.00	215.42
10/04/23	Point of Sale	60 Commissary	2777195	1136877	Commissary	-173.21	42.21
10/04/23	Point of Sale	60 Commissary	2777195	1136879	Commissary	-.50	41.71
10/05/23	Disbursements	80 Postage	2783192	Chk #164790	57217, Reserve Accou, 10/03/2023	-4.67	37.04
10/10/23	Payroll	20 Payroll Adjustment	2831192			-.24	36.80
10/10/23	Payroll	20 Payroll Adjustment	2831192		P/R month of 9 2023	13.00	49.80
10/13/23	Disbursements	84 Library	2863192	Chk #164957	57309, DOC: 523 Fund, 10/10/2023	-6.60	43.20
10/13/23	Disbursements	81 Legal Postage	2863192	Chk #164973	57387, Reserve Accou, 10/11/2023	-1.83	41.37
10/13/23	Disbursements	80 Postage	2863192	Chk #164973	57400, Reserve Accou, 10/12/2023	-.66	40.71
10/17/23	Mail Room	16 GTL	290200	21727071486373	Farley, Jim	100.00	140.71
10/19/23	Point of Sale	60 Commissary	2927217	1138524	Commissary	-107.16	33.55
10/21/23	Mail Room	16 GTL	294200	21731492562469	Inanen, Donna	125.00	158.55
10/27/23	Disbursements	84 Library	3003209	Chk #165182	57702, DOC: 523 Fund, 10/24/2023	-11.30	147.25
10/27/23	Disbursements	81 Legal Postage	3003209	Chk #165196	57716, Reserve Accou, 10/25/2023	-9.55	137.70
11/03/23	Mail Room	16 GTL	307200	21745327774502	Farley, Jim	100.00	237.70
11/07/23	Point of Sale	60 Commissary	3117195	1140362	Commissary	-105.59	132.11
11/07/23	Payroll	20 Payroll Adjustment	3111192		P/R month of 102023	13.00	145.11
11/23/23	Mail Room	16 GTL	327200	21761047234468	Inanen, Donna	125.00	270.11
12/05/23	Point of Sale	60 Commissary	3397217	1142213	Commissary	-191.93	78.18
12/07/23	Payroll	20 Payroll Adjustment	3411192		P/R month of 112023	13.00	91.18
12/08/23	Disbursements	84 Library	3423192	Chk #165840	58389, DOC: 523 Fund, 12/05/2023	-.80	90.38
12/19/23	Point of Sale	60 Commissary	3537195	1143801	Commissary	-28.33	62.05
12/21/23	Disbursements	84 Library	3553192	Chk #166008	058575, DOC: 523 Fun, 12/19/2023	-.80	61.25
12/21/23	Disbursements	81 Legal Postage	3553192	Chk #166018	058621, Reserve Acco, 12/21/2023	-1.59	59.66
12/29/23	Disbursements	88 pen pal membership	3633208	Chk #166092	058741, IPPP, 12/28/2023	-50.00	9.66
01/04/24	Disbursements	80 Postage	0043192	Chk #166209	058765, Reserve Acco, 01/02/2024	-6.30	3.36
01/09/24	Payroll	20 Payroll Adjustment	0091192		P/R month of 122023	13.00	16.36
01/11/24	Disbursements	84 Library	0113192	Chk #166303	058933, DOC: 523 Fun, 01/09/2024	-.90	15.46
01/19/24	Mail Room	16 GTL	019200	21823009071140	Farley, Jim	50.00	65.46
01/23/24	Mail Room	16 GTL	023200	21823062185894	Farley, Jim	60.00	125.46
01/23/24	Point of Sale	60 Commissary	0237195	1145771	Commissary	-124.57	.89
01/24/24	Mail Room	16 GTL	024200	21823139063460	Inanen, Donna	130.00	130.89
02/10/24	Mail Room	16 GTL	041200	21852714301734	Farley, Jim	50.00	180.89
02/13/24	Payroll	20 Payroll Adjustment	0441192		P/R month of 1 2024	14.26	195.15
02/13/24	Point of Sale	60 Commissary	0447223	1147547	Commissary	-190.66	4.49

Date: 2/22/2024

Time: 11:19am

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**Western Illinois Correctional Center
Trust Fund**

[View Transactions](#)

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Inmate: B86997 Farley, Michael P.

Housing Unit: WIL-04-D -24

Date	Source	Transaction Type	Batch	Reference #	Description	Amount	Balance
02/21/24	Mail Room	16 GTL	052200	21852992264611	Inanen, Donna	120.00	124.49
<hr/>							
					Total Inmate Funds:	124.49	
					Less Funds Held For Orders:	.00	
					Less Funds Restricted:	.00	
					Funds Available:	124.49	
					Total Furloughs:	.00	
					Total Voluntary Restitutions:	.00	

I declare under penalty of perjury that the above information is true and correct. I understand that 28 U.S.C. § 1915(e)(2)(A) states that the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: 02-22-2024

Michael P. Farley

Signature of Applicant

Michael P. Farley

(Print Name)

NOTICE TO PRISONERS: In addition to the Certificate below, a prisoner must also attach a print-out from the institution(s) where he or she has been in custody during the last six months, showing all receipts, expenditures and balances in the prisoner's prison or jail trust fund accounts during that period. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account - prepared by each institution where you have been in custody during that six-month period. As already stated, you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE

(Incarcerated applicants only)

(To be completed by the institution of incarceration)

I certify that the applicant named herein, Michael Farley, I.D. # B86997, has the sum of \$ 124.49 on account to his/her credit at (name of institution) Western IL Correctional Center. I further certify that the applicant has the following securities to his/her credit: N/A. I further certify that during the past six months the applicant's average monthly deposit was \$ 209.88. (Add all deposits from all sources and then divide by number of months).

2/22/24

Date

J. Snyder

Signature of Authorized Officer

Jennifer Snyder

(Print Name)

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

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

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
N/A	N/A	N/A	\$ N/A
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
N/A	\$ N/A 0	\$ N/A
N/A	\$ N/A 0	\$ N/A
N/A	\$ N/A 0	\$ 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 N/A

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

Motor Vehicle #2
 Year, make & model N/A
 Value N/A

Other assets
 Description N/A
 Value N/A

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>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</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>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</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>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 <u>telephone</u>)	\$ <u>20.00</u>	\$ <u>N/A</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>N/A</u>
Food	\$ <u>100.00</u>	\$ <u>N/A</u>
Clothing	\$ <u>20.00</u>	\$ <u>N/A</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>N/A</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>N/A</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>10.00</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	\$ <u>N/A</u>	\$ <u>N/A</u>
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		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Department store(s)	\$ <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)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>legal copies & postage</u>	\$ <u>20.00</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>170.00</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 incarcerated and have no job, I only get gift money from family from time to time in order to purchase the things listed, phone minutes and messages and food to keep the hunger pains down. I also need to save up to be able to buy a television which cost \$280.00 (280.00) I cannot afford an attorney or filing fees. Please help. Thank You!

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

Executed on: 02-22-2024, 2024

Michael P. Farley
(Signature)