

No. **24-5245**

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S.
FILED
JUN 25 2024
OFFICE OF THE CLERK

Otis Phillips
(Your Name)

— PETITIONER

VS.

Delaware

— 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 COURT OF APPEALS FOR THE
THIRD CIRCUIT

☐ 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.

Otis Phillips
(Signature)

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? NA

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? NA

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

Executed on: 05-16-2024, 2024

Otis Phillips
(Signature)

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

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

☐ Motor Vehicle #2
Year, make & model 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
<u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
<u>NA</u>	\$ <u>NA</u>	\$ <u>NA</u>
<u>NA</u>	\$ <u>NA</u>	\$ <u>NA</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>NA</u>	<u>NA</u>	<u>NA</u>
<u>NA</u>	<u>NA</u>	<u>NA</u>
<u>NA</u>	<u>NA</u>	<u>NA</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>NA</u>	\$ <u>NA</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>NA</u>	\$ <u>NA</u>
Home maintenance (repairs and upkeep)	\$ <u>NA</u>	\$ <u>NA</u>
Food	\$ <u>NA</u>	\$ <u>NA</u>
Clothing	\$ <u>NA</u>	\$ <u>NA</u>
Laundry and dry-cleaning	\$ <u>NA</u>	\$ <u>NA</u>
Medical and dental expenses	\$ <u>NA</u>	\$ <u>NA</u>

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

JAMES T VAUGHN CORRECTIONAL CENTER
SUPPORT SERVICES OFFICE
MEMORANDUM

TO: Otis Phillips SBI #: 00465842

FROM: JTVCC Support Services/Business Office- Inmate Accounts

RE: **6 month / Average Daily Balance Statement**

DATE: May 13, 2024

Attached are copies of your inmate account statements for the months of

November 2023 to May 2024

Average daily balance/ 6 months: \$ 30.13

Department of Correction Certified Statement

I hereby certify that the appellant named herein has the sum of \$ 67.29 on account to the appellant's credit at the institution where the appellant is confined. I further certify that the appellant has the following securities to the appellant's credit according to the institution's records: N/A

Kara Lyn Austin
Notary Public
State of Delaware
My Commission Expires Upon Office

M.T. 5/13/24
Designee/Date

Kara Lyn Austin 5/13/24
Notary/Date

Attachments
Cc: File

Delaware Department of Correction

Inmate Account Statement

Run Date: 05/13/2024 07:49 AM

Location: JTVCC
Period From: 11/13/2023 To 05/13/2024

Account # : 00465842

Name: PHILLIPS OTIS

Current Location / Housing: JTVCC / Bldg D-WEST Tier C

As of 11/13/2023 Opening Balance: \$58.89 As of 11/13/2023 Opening Available Balance*: \$58.89

Transaction#	Transaction Date	Transaction Description	Check# / Money Order#	Debit	Credit	Hold Amount	Available Balance	Memo, From/To
3743952	11/13/2023	Commissary	201811	\$58.42		\$0.00	\$0.47	JTVCC Commissary
3750244	11/20/2023	IVR Credit Card(GTL)	0531		\$22.05	\$0.00	\$22.52	Johnson Pamela
3751774	11/21/2023	GTL Tablets	201893	\$20.00		\$0.00	\$2.52	GTL
3755220	11/27/2023	Commissary	202026	\$1.47		\$0.00	\$1.05	JTVCC Commissary
3762160	12/04/2023	IVR Credit Card(GTL)	0531		\$74.50	\$0.00	\$75.55	Johnson Pamela
3765863	12/06/2023	Postage	202135	\$9.50		\$0.00	\$66.05	12/5/23,JTVCC Commissary
3767961	12/08/2023	Commissary	202246	\$65.74		\$0.00	\$0.31	JTVCC Commissary
3788465	01/02/2024	IVR Credit Card(GTL)	0531		\$64.50	\$0.00	\$64.81	Johnson Pamela
3792387	01/05/2024	Commissary	202699	\$64.56		\$0.00	\$0.25	JTVCC Commissary
3806349	01/19/2024	IVR Credit Card(GTL)	0531		\$20.05	\$0.00	\$20.30	Johnson Pamela
3810442	01/24/2024	GTL Tablets	202955	\$20.00		\$0.00	\$0.30	GTL
3814226	01/29/2024	Web Payment Credit Card(GTL)	7900		\$60.00	\$0.00	\$60.30	Brown Lisa
3819172	02/02/2024	Commissary	203172	\$56.49		\$0.00	\$3.81	JTVCC Commissary
3821801	02/06/2024	IVR Credit Card(GTL)	0531		\$51.50	\$0.00	\$55.31	Johnson Pamela
3825192	02/07/2024	GTL Tablets	203160	\$20.00		\$0.00	\$35.31	GTL
3831900	02/14/2024	Postage	203338	\$9.50		\$0.00	\$25.81	2/13/24,JTVCC Commissary
3838320	02/22/2024	IVR Credit Card(GTL)	0531		\$25.05	\$0.00	\$50.86	Johnson Pamela
3840628	02/26/2024	Web Payment Credit Card(GTL)	2836		\$25.00	\$0.00	\$75.86	Squillante Danielle
3841696	02/26/2024	Commissary	203570	\$50.01		\$0.00	\$25.85	JTVCC Commissary
3844001	02/28/2024	Postage	203571	\$2.59		\$0.00	\$23.26	2/25/24,JTVCC Commissary
3854426	03/08/2024	Commissary	203845	\$23.08		\$0.00	\$0.18	JTVCC Commissary
3855700	03/11/2024	IVR Credit Card(GTL)	0531		\$171.50	\$0.00	\$171.68	Johnson Pamela
3860695	03/15/2024	Commissary	203982	\$83.73		\$0.00	\$87.95	STATE OF DELAWARE
3865189	03/20/2024	Postage	203983	\$0.64		\$0.00	\$87.31	3/13/24,JTVCC Commissary
3865280	03/20/2024	Postage	203983	\$1.87		\$0.00	\$85.44	3/18/24,JTVCC Commissary
3865318	03/20/2024	Postage	203983	\$1.63		\$0.00	\$83.81	3/19/24,JTVCC Commissary
3865322	03/20/2024	Postage	203983	\$1.63		\$0.00	\$82.18	3/19/24,JTVCC Commissary
3866867	03/22/2024	Commissary	204115	\$82.16		\$0.00	\$0.02	STATE OF DELAWARE
3871103	03/27/2024	Postage	204112	\$0.02		\$1.61	\$0.00	3/21/24,STATE OF DELAWARE
3876999	04/03/2024	Postage		\$0.00		\$5.95	\$0.00	3/31/24,STATE OF DELAWARE
3877038	04/03/2024	Postage		\$0.00		\$4.87	\$0.00	4/2/24,STATE OF DELAWARE
3877514	04/03/2024	Commissary	204222		\$3.12	\$0.00	\$3.12	STATE OF DELAWARE
3877745	04/04/2024	Other Hold Payment	204224	\$3.12		\$0.00	\$0.00	Postage,STATE OF

Delaware Department of Correction

Inmate Account Statement

Run Date: 05/13/2024 07:49 AM

Location: JTVCC
Period From: 11/13/2023 To 05/13/2024

Account # : 00465842

Transaction#	Transaction Date	Transaction Description	Check# / Money Order#	Debit	Credit	Hold Amount	Available Balance	Memo, From/To
								DELAWARE
3878938	04/05/2024	IVR Credit Card(GTL)	0531		\$54.50	\$0.00	\$54.50	Johnson Pamela
3880217	04/06/2024	Other Hold Payment	204351	\$9.31		\$0.00	\$45.19	Postage,STATE OF DELAWARE
3888177	04/12/2024	Commissary	204488	\$44.76		\$0.00	\$0.43	STATE OF DELAWARE
3899204	04/25/2024	IVR Credit Card(GTL)	8797		\$191.50	\$0.00	\$191.93	Williams Candasi
3901760	04/26/2024	Commissary	204733	\$84.78		\$0.00	\$107.15	STATE OF DELAWARE
3906162	05/01/2024	Postage	204729	\$0.64		\$0.00	\$106.51	4/28/24,STATE OF DELAWARE
3913587	05/08/2024	IVR Credit Card(GTL)	0531		\$51.50	\$0.00	\$158.01	Johnson Pamela
3914607	05/08/2024	Postage	204828	\$0.64		\$0.00	\$157.37	5/2/24,STATE OF DELAWARE
3914733	05/08/2024	GTL Tablets	204817	\$20.00		\$0.00	\$137.37	GTL
3917174	05/10/2024	Commissary		\$70.08		\$0.00	\$67.29	STATE OF DELAWARE

Total: \$806.37 \$814.77

As of 05/13/2024 Current Balance: \$67.29 Available Balance*: \$67.29

Total Amount on Hold As of 05/13/2024:	Facility	Medical Copay	Legal	Restitution	Indigent	Room and Board	Others	Court Fees
	JTVCC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	HRYCI	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00