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MAY 20 2024
OFFICE OF THE CLERK
SUPREME COURT, U.S.

24 - 5265

IN THE ~~SUPREME COURT~~ THE UNITED STATES AMERICA

DIVISION

Fred Lee Williams

PETITIONER

VS.

NO. CR-14-1088

State of Arkansas

RESPONDENT

Motion

PETITION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Petitioner, Fred Lee Williams, proceeding pro se, requests this Court to grant him leave to file the attached Petition for a Writ of Certiorari and to proceed in forma pauperis for the following reasons:

That Petitioner, a resident of the State of Arkansas, has prepared and desires to file with the court a Review of the Arkansas Supreme Court's decision in CR14-1088,

That Petitioner is indigent and unable to pay court costs or fees connected with this proceeding or to give security therefore. (An Affidavit in Support of Request to proceed In Forma Pauperis is attached.)

Petitioner believes that he/she is entitled to relief and such petition is not brought for a frivolous or malicious purpose

WHEREFORE, Petitioner prays that he be permitted to prosecute his Writ of Certiorari to review decision in forma pauperis and that he may have the necessary writs and processes without payment of fees or costs for the same

Respondent: State of Arkansas

323 Center Street - Suite 200
LITTLE ROCK, AR 72201

Arkansas Supreme Court
Justice Center

Justice Bldg. Suite 1300
625 Marshall St.
LITTLE ROCK, AR 72201

Fred Lee Williams ADC 093355
PETITIONER pro se

ADC # 093355
EARK Unit
Arkansas Department of Correction
P.O. Box 970

Marianna, AR 72360

date: May 19, 2024

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

I, Fred Lee Williams, 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 cost of this case or to give security therefore 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 source 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>0</u>	\$ _____
Self-employment	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Income from real property	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Retirement	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Disability	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Public-assistance	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Other (specify) _____	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Total monthly income:	\$ <u>0</u>	\$ _____	\$ <u>0</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
<u>None</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
			\$ _____
			\$ _____
			\$ _____

4. How much cash do you and your spouse have? \$ None

Below, state any money your or your spouse have in bank accounts or in any other financial institution.

Financial Institution	Balance
<u>None</u>	\$ <u>0</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 0 Other real estate 0

Motor vehicle 0 Motor vehicle 0

Other assets 0

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>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
<u>None</u>	_____	_____
_____	_____	_____
_____	_____	_____

8. Estimate the average monthly expenses for 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	\$ <u>0</u>	\$ _____
Are real estate taxes included?	Yes <u>No</u>	
Is property insurance included?	Yes <u>No</u>	
Utilities	\$ <u>0</u>	\$ _____
Home maintenance	\$ <u>0</u>	\$ _____
Food	\$ <u>0</u>	\$ _____
Clothing	\$ <u>0</u>	\$ _____
Laundry and dry-cleaning	\$ <u>0</u>	\$ _____
Medical and dental expenses	\$ <u>0</u>	\$ _____
Transportation	\$ <u>0</u>	\$ _____
Recreation, entertainment, newspapers, etc.	\$ <u>0</u>	\$ _____

	You	Your spouse
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Insurance (not deducted from wages or included in mortgage payments)

Homeowner's or renter's	\$ <u>0</u>	\$ _____
Life	\$ <u>0</u>	\$ _____
Health	\$ <u>0</u>	\$ _____
Motor Vehicle	\$ <u>0</u>	\$ _____
Other _____	\$ <u>0</u>	\$ _____

Taxes (not deducted from wages or included in mortgage payments)

(specify): _____	\$ <u>0</u>	\$ _____
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Installment payments

Motor Vehicle	\$ <u>0</u>	\$ _____
Credit card(s)	\$ <u>0</u>	\$ _____
Department store(s)	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ _____

Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ _____
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Other (specify): _____	\$ <u>0</u>	\$ _____
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Total monthly expenses:	\$ <u>0</u>	\$ _____
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9. Do you expect any major change 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. *Petitioner is an unemployed, inmate incarcerated*

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

Executed on: May 19, 2024

Julie Williams

(Signature)

ADC 093355

P.O. Box 970

Marianna Av 72360