

24-5641 ~~No:~~ ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S.
FILED

SEP 16 2024

NAWAZ AHMED – PETITIONER

OFFICE OF THE CLERK

Vs.

TIM SHOOP, WARDEN, RESPONDENT

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPRIS

NAWAZ AHMED,

A404511,RCI.

Prisoner, Pro Se, Petitioner,

Ross Correctional Institute,

P.O.Box.7010,

16419 Sate Route 104 North,

Chillicothe, OHIO 45601-7010.

Case No;-----

IN THE

SUPREME COURT OF THE UNITED STATES

NAWAZ AHMED – PETITIONER

Vs.

TIM SHOOP, WARDEN, RESPONDENT

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

(Sup. Ct. R. 39.1,4 and 18 USCS 3006A(d)(7))

1. Petitioner pro se Nawaz Ahmed a prisoner on Ohio deathrow since 2000 asks leave to file the attached Petition for writ of certiorari and Petition for extra ordinary writ, without prepayment of costs and to proceed in forma **PAUPERIS**.
2. Petitioner is under ADA defined legal, medical, mental and physical disability, with three heart operations, stent, pacemaker, cardiac double bypass, diabetics, DVT, Cataract in both eyes.
3. Petitioner pro se submit that Jurisdiction is founded per 28 USCS § 1254(1) in this capital habeas corpus case, to file Petition for Certiorari review and Petition for extra ordinary writ of Prohibition and or Mandamus as authorized by 28 U.S.C. § 1651(a) in support of Jurisdiction.
4. Petitioner has previously been granted leave to proceed in forma **PAUPERIS** in the following courts. (a) Supreme Court of the United States in case, 22-7574 and 18-9331 etc.. (b) Court of Appeals for the sixth circuit, Case 20-4302, and 18-3292 etc.

(c). United States District Court for the Southern District of Ohio, case 2:07-cv-658.

(d) Supreme Court of Ohio, Case 2024-0506 and 2001-0871 etc.

5. Petitioner state under penalty of perjury and declare in compliance with 28 U.S.C. § 1746) that he was found to be an indigent and per [18 U.S.C.S. § 3599(a)(2),(e)] and 28 U.S.C. A. § 2254(h) and 18 U.S.C. § 3006A(a)(2)(B) and 6 Cir. R. 45(a)(5),"Order by Clerk--appointment of Counsel)."appointed two counsels in habeas corpus appeal case 21-3542 and was before permitted to file 28 U.S.C. A. § 2254 Habeas Corpus Petition without payment of statutory \$5 filing fee by the United States District Court for the Southern District of OH in case 20-07-cv-658 and appointed two habeas counsels. See (Ecf.#1 and Ecf. #3). See Adkins v. E.I. DuPont de Numours & Co., 335 U.S. 331, 339, 69 S. Ct. 85, 93 L. Ed. 43 (1948) ("The affidavit is sufficient if it states that the plaintiff, because of his poverty, cannot "pay or give security for the costs" and still be able to **provide for himself** and dependents "with necessities of life." Syllabus: 3.). Ex parte Abdu, 247 U.S. 27, 30, 38 S. Ct. 447, 448, 62 L. Ed. 966 (1918) (right to proceed IFP not absolute, but dependent on exercise of discretion by appellate court).

6. Case Is "in" Court of Appeals if Court Has Jurisdiction. The court of appeals has jurisdiction of a case if the district court has rendered a final, appealable order from which a timely appeal has been taken. *see Hohn v. United States*, 524 U.S. 236, 118 S. Ct. 1969, 1972-1976, 141 L. Ed. 2d 242 (1998) (Supreme Court has jurisdiction to review court of appeals decision denying application for certificate of appealability under Antiterrorism and Effective Death Penalty Act [28 U.S.C. § 2253(c)(1)]); that certificate of appealability is threshold requirement to be met before court of appeals considers merits of case does not mean that application for certificate is not "case in" court of appeals, since denial of application is judicial determination of case). **Dismissal of case**. *See Firestone Tire & Rubber Co. v. Risjord*, 449 U.S. 368, 379, 101 S. Ct. 669, 66 L. Ed. 2d 571 (1981) (appellate court lacked jurisdiction as there was no final judgment by district court on merits);.

7. The Court also made the Clerk as sole Respondent -- to review judicial action – by Mandamus-- Ex parte Abdu, 247 U.S. 27.

. Youngstown Sheet & Tube Co. v. Sawyer, 343 U.S. 579, 584, 72 S. Ct. 863, 96 L. Ed. 1153, 62 Ohio Law Abs. 417 (1952) (certiorari granted where Court “deemed it best that issues raised be promptly decided”).

Application for the writ ordinarily must be made to this court as the court of ultimate review only in such exceptional cases. That the present case falls within the latter description seems clear. Cf. Ex parte Abdu, 247 U.S. 27(1918); In re Wilson, 140 U.S. 575, 582; In re Delgado, 140 U.S. 586; In re Schneider, 148 U.S. 162; In re Frederick, 149 U.S. 70, 76; In re Tyler, 149 U.S. 164, 180; In re Swan, 150 U.S. 637, 648; In re Chapman, 156 U.S. 211; In re Lennon, 166 U.S. 548; In re McKenzie, 180 U.S. 536. Ex parte Yarbrough, 110 U.S. 651;. Although an appeal need not be from a final *judgment*, still it must be from a final *decision*. FirstTier Mortgage Co. v. Investors Mortgage Co., 498 U.S. 269, 276, 112 L. Ed. 2d 743, 111 S. Ct. 648 (1991).

Advisory Committee suggest that Rule 4(a)(2).

CONCLUSION

Petitioner submit this IFP Motion for filing the Petition for writ of certiorari and for filing the Petition for filing the extra ordinary writ in support of jurisdiction. Petitioner was granted 60 days extension to time by Hon.Circuit Justice to file these Petition for Writ of Certiorari and Petition for extra ordinary writs was granted upto and including September 14,2024 on July 15,2024 In Application NO: 24A35. Petitioner request the court that his pro se Motion for Leave to proceed in Forma Paupris under Supreme Court Rule 39.1,4 be granted.

Respectfully Submitted



(NAWAZ AHMED),

A404511,RCI.

Prisoner, Pro Se, Petitioner,

Ross Correctional Institute,
P.O.Box.7010, 16419 Sate Route 104 North,
Chillicothe, OHIO 45601-7010.

Dated: September 3 ,2024.

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

I, _____, 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	\$ 16 PM state pay for expense		\$ 16.00	
Self-employment	\$	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$	\$	\$	\$
Disability (such as social security, insurance payments)	\$	\$	\$	\$
Unemployment payments	\$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify): _____	\$	\$	\$	\$
Total monthly income:	\$	\$	\$	\$

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
			\$
			\$
			\$

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? \$ _____
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
		\$	\$
		\$	\$
		\$	\$

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

Home
Value _____ *Nil*

Other real estate
Value _____ *Nil*

Motor Vehicle #1
Year, make & model _____ *Nil*
Value _____ *Nil*

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

Other assets
Description _____ *Nil*
Value _____ *Nil*

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
<hr/>	\$ <hr/>	\$ <hr/>
<hr/>	\$ <hr/>	\$ <hr/>
<hr/>	\$ <hr/>	\$ <hr/>

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

Name	Relationship	Age
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

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>Prisoner</u>	\$ <hr/>
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>	\$ <hr/>
Home maintenance (repairs and upkeep)	\$ <u>NIL</u>	\$ <hr/>
Food	\$ <u>NIL</u>	\$ <hr/>
Clothing	\$ <u>NIL</u>	\$ <hr/>
Laundry and dry-cleaning	\$ <u>6 PM</u>	\$ <hr/>
Medical and dental expenses	\$ <u>NIL</u>	\$ <hr/>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/L</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? Nil

If yes, state the attorney's name, address, and telephone number:

Nil

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 *printing and postage to RCI*

If yes, how much? approximately \$ 150-- for all cases.

If yes, state the person's name, address, and telephone number:

RCI

12. Provide any other information that will help explain why you cannot pay the costs of this case.

*property - Courts have pointed Case in OH and Fed Cases. See Appeal
case 21354 and OH SMI PCR Trial Case 99-cr-192 and Appeal case
22-BE-049*

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

Executed on: September 13, 2024


(NANAZ AHMED) 1404-511
(Signature)
RCI - P.O. Box 7610
Chillicothe, OH 45621