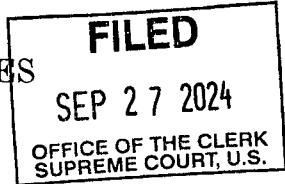


No.

24-6144

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES



Michael Roy Fuller — PETITIONER
(Your Name)

VS.

Chadwick Dotson 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):

Circuit Court, Caroline County, Virginia

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.

M. R. Fuller

(Signature)

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

I, Michael Roy Fuller, 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	\$ NA	\$ 0	\$ NA
Self-employment	\$ 0	\$ NA	\$ 0	\$ NA
Income from real property (such as rental income)	\$ 0	\$ NA	\$ 0	\$ NA
Interest and dividends	\$ 0	\$ NA	\$ 0	\$ NA
Gifts	\$ 0	\$ NA	\$ 0	\$ NA
Alimony	\$ 0	\$ NA	\$ 0	\$ NA
Child Support	\$ 0	\$ NA	\$ 0	\$ NA
Retirement (such as social security, pensions, annuities, insurance)	\$ 1008	\$ NA	\$ 915	\$ NA
Disability (such as social security, insurance payments)	\$ 0	\$ NA	\$ 0	\$ NA
Unemployment payments	\$ 0	\$ NA	\$ 0	\$ NA
Public-assistance (such as welfare)	\$ 0	\$ NA	\$ 0	\$ NA
Other (specify) <u>Food Stamps</u>	\$ 120	\$ NA	\$ 120	\$ NA
Total monthly income:	\$ 1128	\$ NA	\$ 1035	\$ NA

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
			\$ \$
			\$ \$

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
			\$ \$
			\$ \$

4. How much cash do you and your spouse have? \$ 50
 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
Checking	\$ 68	\$ 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 \$ 180,000

Other real estate
 Value NA

Motor Vehicle #1
 Year, make & model NA
 Value _____

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

Other assets
 Description NA
 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

NA

Amount owed to you

\$ NA
\$ _____
\$ _____

Amount owed to your spouse

\$ NA
\$ _____
\$ _____

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
NA

Relationship
NA

Age
NA

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)

\$ 600

\$ NA

Are real estate taxes included? Yes No

Is property insurance included? Yes No

Utilities (electricity, heating fuel,
water, sewer, and telephone)

\$ NA

\$ NA

Home maintenance (repairs and upkeep)

\$ NA

\$ NA

Food

\$ NA

\$ NA

Clothing

\$ NA

\$ NA

Laundry and dry-cleaning

\$ NA

\$ NA

Medical and dental expenses

\$ 20

\$ NA

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 30	\$ NA
Recreation, entertainment, newspapers, magazines, etc.	\$ 60	\$ NA
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ NA	\$ NA
Life	\$ NA	\$ NA
Health	\$ 35	\$ NA
Motor Vehicle	\$ NA	\$ NA
Other: _____	\$ NA	\$ NA
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ NA	\$ NA
Installment payments		
Motor Vehicle	\$ NA	\$ NA
Credit card(s)	\$ 120	\$ NA
Department store(s)	\$ NA	\$ NA
Other: _____	\$ NA	\$ NA
Alimony, maintenance, and support paid to others	\$ NA	\$ NA
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ NA	\$ NA
Other (specify): _____	\$ NA	\$ NA
Total monthly expenses:	\$ 865	\$ NA

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 have been impoverished due to corruption of federal and state agencies and processes performed by such to destroy me for exposing said corruption.

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

Executed on: 9-25-24, 20____


(Signature)

Acknowledgment by Individual

State of

VIRGINIA

County of

SPOTSYLVANIA

On this 25 day of September, 20 24. Before me, TANVEER QURESHI

(Name of Notary Public)

the undersigned Notary Public, personally appeared

MICHAEL ROY FULLER

Name of Signer(s)

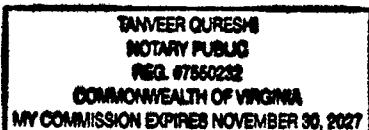
Proved to me on the oath of _____

Personally known to me

Proved to me on the basis of satisfactory evidence VA DL T63478057 exp 07/31/2025
(Description of ID)

to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that he/she/they executed it.

WITNESS my hand and official seal.



Notary Seal

Tanveer Qureshi

(Signature of Notary Public)

My commission expires 11-30-2027

For Bank Purposes Only

Description of Attached Document

Type or Title of Document

Supreme Court of USA Motion for leave to Proceed
in Extraordinary

Document Date

Number of Pages

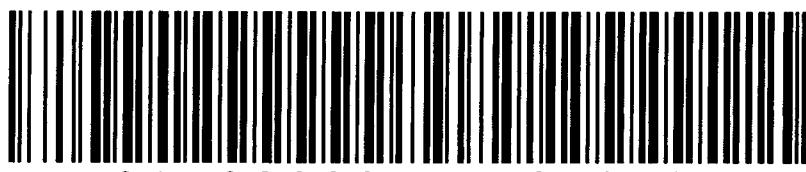
09/25/20246

Signer(s) Other Than Named Above

Account Number (if applicable)

Optional: A thumbprint is
only needed if state statutes
require a thumbprint.Right Thumbprint
of Signer

Top of thumb here



F 0 0 1 - 0 0 0 0 0 D S G 5 3 5 0 - 0 1