

24-6446

NO. \_\_\_\_\_

IN THE

SUPREME COURT OF THE UNITED STATES

ORIGINAL

FILED

DEC 10 2024

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

LARAYNA MANNING

PETITIONER

VS.

COMMONWEALTH OF KENTUCKY

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*.

[ XX ] Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):

- A. CHRISTIAN CIRCUIT COURT (2020-CR-00635)
- B. SUPREME COURT OF KENTUCKY (2023-SC-0144-MR)

[ ] 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.

*Larayna Manning*  
LARAYNA MANNING

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OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, **LARAYNA MANNING**, 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	\$0.00	\$0.00	\$0.00	\$0.00
Self-Employment	\$0.00	\$0.00	\$0.00	\$0.00
Income from real Property	\$0.00	\$0.00	\$0.00	\$0.00
Interest & Dividends	\$0.00	\$0.00	\$0.00	\$0.00
Gifts	\$0.00	\$0.00	\$0.00	\$0.00
Alimony	\$0.00	\$0.00	\$0.00	\$0.00
Child Support	\$0.00	\$0.00	\$0.00	\$0.00
Retirement	\$0.00	\$0.00	\$0.00	\$0.00
Disability	\$0.00	\$0.00	\$0.00	\$0.00
Unemployment	\$0.00	\$0.00	\$0.00	\$0.00
Public-assistance	\$0.00	\$0.00	\$0.00	\$0.00
Other (specify):	\$0.00	\$0.00	\$0.00	\$0.00
Total monthly Income	\$0.00	\$0.00	\$0.00	\$0.00

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Date of Employment	Gross monthly pay
_____	_____	_____	\$0.00
_____	_____	_____	\$0.00
_____	_____	_____	\$0.00

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
_____	_____	_____	\$0.00
_____	_____	_____	\$0.00
_____	_____	_____	\$0.00

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
_____	_____	\$0.00	\$0.00
_____	_____	\$0.00	\$0.00

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

[ ] Home  
Value \$0.00

[ ] Other real estate  
Value \$0.00

[ ] Motor Vehicle #1  
Year, make & model \_\_\_\_\_  
Value \$0.00

[ ] Motor Vehicle #2  
Year, make & model \_\_\_\_\_  
Value \$0.00

[ ] Other assets  
Description \_\_\_\_\_  
Value \$0.00

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
_____	\$0.00	\$0.00
_____	\$0.00	\$0.00
_____	\$0.00	\$0.00

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

Person	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

8. Estimate the average monthly expenses of your 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)	\$0.00	\$0.00
Are real estate taxes included? [ ] yes [ ] no		
Is property insurance included? [ ] yes [ ] no		
Utilities (electricity, heating fuel, Water, sewer, and telephone)	\$0.00	\$0.00
Home maintenance (repairs and upkeep)	\$0.00	\$0.00
Food	\$0.00	\$0.00
Clothing	\$0.00	\$0.00
Laundry and dry-cleaning	\$0.00	\$0.00
Medical and dental expenses	\$0.00	\$0.00

	<b>You</b>	<b>Your Spouse</b>
Transportation (not including motor vehicle payments)	\$0.00 _____	\$0.00 _____
Recreation, entertainment, newspapers, magazines, etc.	\$0.00 _____	\$0.00 _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$0.00 _____	\$0.00 _____
Life	\$0.00 _____	\$0.00 _____
Health	\$0.00 _____	\$0.00 _____
Motor Vehicle	\$0.00 _____	\$0.00 _____
Other:	\$0.00 _____	\$0.00 _____
Taxes (not deducted from wages or included in mortgage payments)		
(Specify): _____	\$0.00 _____	\$0.00 _____
Installment payments		
Motor Vehicle	\$0.00	\$0.00
Credit Card (s)	\$0.00	\$0.00
Department Store (s)	\$0.00	\$0.00
Other: _____	\$0.00	\$0.00
Alimony, maintenance, and support paid to others	\$0.00	\$0.00
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$0.00	\$0.00
Other (specify): _____	\$0.00	\$0.00
<b>Total monthly expenses:</b>	\$0.00	\$0.00

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 attorney 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 paralegal or a typist) any money for serviced 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:

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

***I AM PRESENTLY INCARCERATED AND LIVE ON STATE PAY***

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

Executed on: 12-10, 2024

  
LARAYNA MANNING