

Kenja O. Carmichael #1894-041

Springfield F.M.C.

P.O. Box 4000

Springfield, Missouri 65801-4000

UNITED STATES SUPREME COURT

WASHINGTON D.C. 20543

APPEAL NO. 24-10700-
APPEAL NO. 24-3522
ORIGINAL

24-7259

FILED
APR 24 2025
OFFICE OF THE CLERK
SUPREME COURT, U.S.

KENJA O. CARMICHAEL;
Plaintiff,

Case No. 6:24-cv-03319-BCW
Notice of civil commitment case no.
6:15-cv-03310-MDH

v.

WARDEN Mark King,
Defendant,

MOTION FOR THE HONORABLE COURT TO PROCEED
without paying the filing fees and Court costs But to waive the Fees

Comes Now, Plaintiff Kenja O. Carmichael, proceeding pro se, initiated this action by filing a civil rights complaint pursuant to Bivens v. Six Unknown Named Agents of Fed. Bureau of Narcotics, 403 U.S. 388, 389, 397 (1971). Plaintiff moves to proceed without paying the filing fees or any court costs. Plaintiff ask that this Honorable Court waive all filing fees. Plaintiff construes to the district court that, the Prison Litigation Reform Act (PLRA) does not apply to the Plaintiff, Carmichael in which he is civilly committed under 28 U.S.C. 4246 the civil commitment case No. 6:15-cv-03310-MDH, Plaintiff Carmichael is a civil detainee at the Springfield Federal Medical Center in Springfield, Mo 65801 see Perkins v. Hedricks, 340, 3d 582 (8th Cir. 2003) (per Curiam) (litigant that "appealed) to be civilly committed" was not a prisoner within the meaning of the (Prison Litigation Reform Act) see also Jones v. Guomo, 2F.4th 22, 24 (2d Cir. 2021) (Civil detainee not a prisoner" within the meaning of the Prison Litigation Reform Act) And I state as follows.

No. _____

USDC.6:24-cv-03319-BCW

IN THE
SUPREME COURT OF THE UNITED STATES
App.24-3522

In Re Kenja O. Carmichael — PETITIONER
(Your Name)

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The petitioner asks leave to file the attached petition for a writ of habeas corpus without prepayment of costs and to proceed *in forma pauperis*.

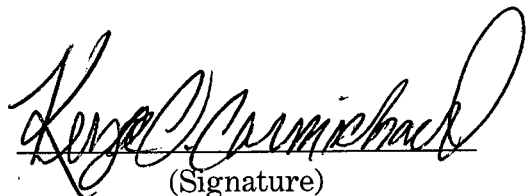
Please check the appropriate boxes:

☒ Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

United States District Court for the Western District of Missouri, and United States Court of Appeals for the Eighth 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.


(Signature)

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

I, *Spencer Michael*, 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.

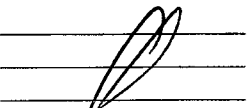
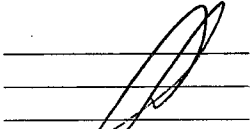
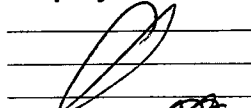
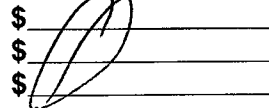
1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any 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><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Self-employment	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Income from real property (such as rental income)	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Interest and dividends	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Gifts	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Alimony	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Child Support	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Disability (such as social security, insurance payments)	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Unemployment payments	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Public-assistance (such as welfare)	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Other (specify): <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>
Total monthly income:	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>	\$ <u><i>0</i></u>

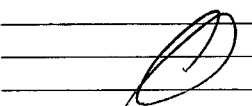

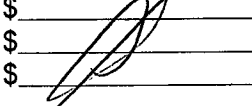
2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay
			\$ 

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.)

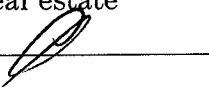
Employer	Address	Dates of Employment	Gross monthly pay
			\$ 

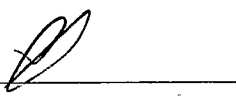

4. How much cash do you and your spouse have? \$ 
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

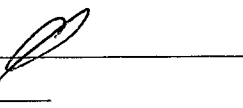
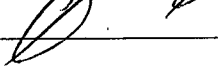
Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
	\$ 	\$ 

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

☐ Home
Value 

☐ Other real estate
Value 

☐ Motor Vehicle #1
Year, make & model 
Value 

☐ Motor Vehicle #2
Year, make & model 
Value 

☐ Other assets
Description 
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

Amount owed to you

\$ _____
\$ _____
\$ _____

Amount owed to your spouse

\$ _____
\$ _____
\$ _____

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

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.

Rent or home-mortgage payment
(include lot rented for mobile home)

Are real estate taxes included? ☐ Yes ☒ No
Is property insurance included? ☐ Yes ☒ No

You

\$ _____

Your spouse

\$ _____

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

\$ _____

\$ _____

Home maintenance (repairs and upkeep)

\$ _____

\$ _____

Food

\$ _____

\$ _____

Clothing

\$ _____

\$ _____

Laundry and dry-cleaning

\$ _____

\$ _____

Medical and dental 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? _____

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

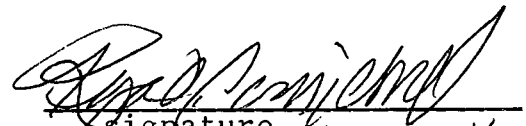
Executed on: April 25, _____, 2015


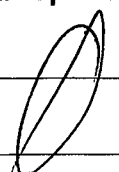
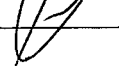
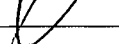


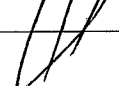
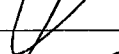

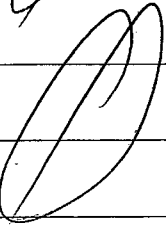

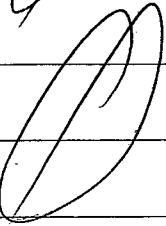


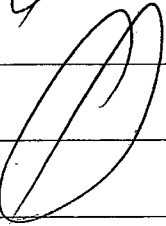
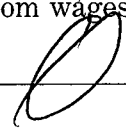
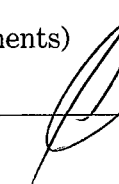

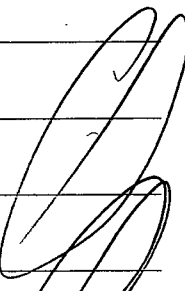

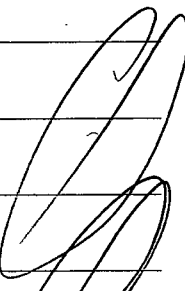

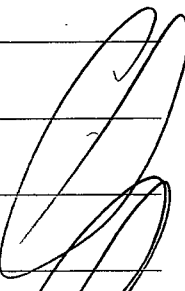

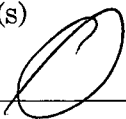
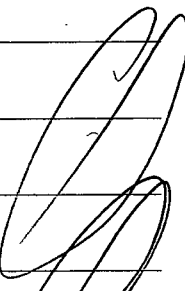


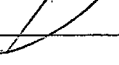
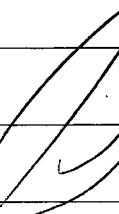

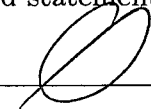
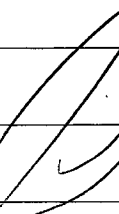


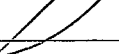
Rena O. Carrichal
(Signature)

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

The Petitioner is completely indigent, and is also injured due to cruel unusual punishment, and torture, harassment etc. Please consider the Petitioner indigent at this moment and time. The petitioner has only about \$276.00 inside his inmate account. The Petitioner is unable to work and pay for the costs of this case right now please consider the Petitioner indigent.

April 25, 2025


signature 11894-041

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 	\$ 
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:	\$ 	\$ 

CERTIFICATE
(Prisoner ACCOUNTS Only)

I HEREBY CERTIFY THAT Carmichael, Kenja has the sum of
\$ 267.88 as of 04-24-25 on account to his credit at
(date)

the USMCFP institution where he/she is confined.

I further certify that the above-named prisoner affiant has the following
securities to his credit according to the records of this institution:

E. Hargrave / Counselor
Authorized Officer of Institution

Inmate Statement



Inmate Reg #:	11894041	Current Institution:	Springfield MCFP
Inmate Name:	CARMICHAEL, KENJA	Housing Unit:	SPG-G-P
Report Date:	04/24/2025	Living Quarters:	G01-008L
Report Time:	11:46:08 AM		

<u>Alpha Code</u>	<u>Date/Time</u>	<u>Reference#</u>	<u>Payment#</u>	<u>Receipt#</u>	<u>Transaction Type</u>	<u>Transaction Amount</u>	<u>Encumbrance Amount</u>	<u>Ending Balance</u>
SPG	4/17/2025	TL0417			TRUL Withdrawal	(\$5.00)		\$267.88
SPG	4/15/2025	TL0415			TRUL Withdrawal	(\$30.00)		\$272.88
SPG	4/15/2025	TL0415			TRUL Withdrawal	(\$2.00)		\$302.88
SPG	4/15/2025	TL0415			TRUL Withdrawal	(\$10.00)		\$304.88
SPG	4/15/2025	95			Sales	(\$85.75)		\$314.88
SPG	4/14/2025	33325104			Western Union	\$100.00		\$400.63
SPG	4/14/2025	33325104			Western Union	\$300.00		\$300.63
SPG	3/18/2025	TL0318			TRUL Withdrawal	(\$2.00)		\$0.63
SPG	3/18/2025	TL0318			TRUL Withdrawal	(\$2.00)		\$2.63
SPG	3/18/2025	57			Sales	(\$30.55)		\$4.63
SPG	3/11/2025	TL0311			TRUL Withdrawal	(\$2.00)		\$35.18
SPG	3/11/2025	TL0311			TRUL Withdrawal	(\$10.00)		\$37.18
SPG	3/11/2025	26			Sales	(\$61.45)		\$47.18
SPG	3/10/2025	TL0310			TRUL Withdrawal	(\$2.00)		\$108.63
SPG	3/10/2025	TL0310			TRUL Withdrawal	(\$10.00)		\$110.63
SPG	3/7/2025	TL0307			TRUL Withdrawal	(\$10.00)		\$120.63
SPG	3/4/2025	TL0304			TRUL Withdrawal	(\$30.00)		\$130.63
SPG	3/4/2025	60			Sales	(\$89.40)		\$160.63
SPG	3/3/2025	33325062			Western Union	\$125.00		\$250.03
SPG	3/3/2025	33325062			Western Union	\$125.00		\$125.03
SPG	2/4/2025	TL0204			TRUL Withdrawal	(\$2.00)		\$0.03
SPG	2/4/2025	TL0204			TRUL Withdrawal	(\$2.00)		\$2.03
SPG	2/4/2025	TL0204			TRUL Withdrawal	(\$5.00)		\$4.03
SPG	2/4/2025	31			Sales	(\$18.00)		\$9.03
SPG	1/28/2025	37			Sales	(\$89.65)		\$27.03
SPG	1/27/2025	TL0127			TRUL Withdrawal	(\$10.00)		\$116.68
SPG	1/27/2025	33325027			Western Union	\$125.00		\$126.68
SPG	1/22/2025	80			Sales	(\$9.35)		\$1.68
SPG	1/20/2025	TL0120			TRUL Withdrawal	(\$5.00)		\$11.03
SPG	1/15/2025	35			Sales	(\$22.50)		\$16.03
SPG	1/13/2025	TL0113			TRUL Withdrawal	(\$5.00)		\$38.53
SPG	12/17/2024	86			Sales	(\$51.70)		\$43.53
SPG	12/16/2024	TL1216			TRUL Withdrawal	(\$30.00)		\$95.23
SPG	12/16/2024	33324351			Western Union	\$125.00		\$125.23

1

Total Transactions: 34

Totals: \$267.65 \$0.00

<u>Current Balances</u>								
<u>Alpha Code</u>	<u>Available Balance</u>	<u>Pre-Release Balance</u>	<u>Debt Encumbrance</u>	<u>SPO Encumbrance</u>	<u>Other Encumbrance</u>	<u>Outstanding Instruments</u>	<u>Administrative Holds</u>	<u>Account Balance</u>

SPG	\$267.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$267.88
Totals:	\$267.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$267.88

Other Balances

<u>National 6</u> <u>Months Deposits</u>	<u>National 6</u> <u>Months</u> <u>Withdrawals</u>	<u>Natioanl 6</u> <u>Months Avg Daily</u> <u>Balance</u>	<u>Local Max</u> <u>Balance - Prev 30</u> <u>Days</u>	<u>Average Balance -</u> <u>Prev 30 Days</u>	<u>Commissary</u> <u>Restriction Start</u> <u>Date</u>	<u>Commissary</u> <u>Restriction End</u> <u>Date</u>
\$900.00	\$632.35	\$32.83	\$400.63	\$97.71	N/A	N/A