

No. _____

IN THE
Supreme Court of the United States

Alejandro Avila Salazar , *Petitioner*,

v.

State of Tennessee , *Respondent*.

**On Petition For A Writ Of Certiorari To
The Tennessee Court of Criminal Appeals,
Middle District**

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Alejandro Avila Salazar #410618, *pro se*
S.C.C.F.; P.O.Box # 279
Clifton Tenn, 38425

Counsel for Petitioner

1) Comes now the Petitioner, Alejandro Avila Salazar pursuant to 28 U.S.C. § 1746, 28 U.S.C. § 1621; and *S.Ct. Rule 39(1)* and hereby submits the instant Motion for leave to proceed *in Forma Pauperis*.

2) Pursuant to *S.Ct. Rule 39(1)*:

A party seeking to proceed in forma pauperis shall file a motion for leave to do so, together with the party's notarized affidavit or declaration (in compliance with 28 U.S.C. § 1746) in the form prescribed by the Federal ***Rules of Appellate Procedure, Form 4***. The motion shall state whether leave to proceed in forma pauperis was sought in any other court and, if so, whether leave was granted. If the court below appointed counsel for an indigent party, no affidavit or declaration is required, but the motion shall cite the provision of law under which counsel was appointed, or a copy of the order of appointment shall be appended to the motion..

3) Petitioner hereby gives notice that he has filed, herewith two (2) appendices, which contains all of the disclosures required by *Form 4.Affidavit*

*Accompanying Motion for Permission to Appeal in
Forma Pauperis..*

4) Petitioner has also included a six month,
transaction printout pursuant to 28 U.S.C. § 1915(a)
(1)-(2) see Appendix II.

5) **Wherefore the foregoing** reasons, Petitioner
prays that this court grants him leave to proceed in
Forma Pauperis and accepts his Application for
Writ of Certiorari filed pursuant to *S.Ct. Rule 12* .

Respectfully submitted,

Alejandro Avila S-2

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S.C.C.F.; P.O.Box # 279
Clifton Tenn, 38425

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IN THE
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Alejandro Avila Salazar , *Petitioner*,

v.

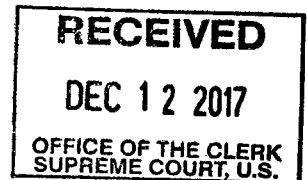
State of Tennessee , *Respondent*.

**On Petition For A Writ Of Certiorari To
The Tennessee Court of Criminal Appeals,
Middle District**

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

Alejandro Avila Salazar #410618, *pro se*
S.C.C.F.; P.O.Box # 279
Clifton Tenn, 38425

Counsel for Petitioner



1) I swear and affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear and affirm under penalty of perjury under United States laws that my answers on this form are true and correct.

Respectfully submitted,

Alejandro Avila S. 2

Alejandro Avila Salazar #410618, *pro se*
S.C.C.F.; P.O.Box # 279
Clifton Tenn, 38425

**CERTIFICATE OF SERVICE & DECLARATION
PURSUANT TO 28 U.S.C. § 1746**

Pursuant to 28 U.S.C. § 1746, I Alejandro Avila Salazar #410618, declare under penalty of perjury that a copy of the herein mentioned documents have been forwarded to the following individual(s) via First-Class United States Postage Pre-Paid by placing these legal document(s) in the prison's mailing system on this the 6th day of December 2017:

Herbert H. Slatery, III State Attorney General
425 Fifth Ave. N.
P.O.Box. 20207
Nashville Tenn, 37202
Tele: 615-741-3491

Alejandro Avila S.2
Alejandro Avila Salazar #410618, *pro se*
S.C.C.F.; P.O.Box # 279
Clifton Tenn, 38425

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 35	\$ N/A	\$ 35	\$ N/A
Self-employment	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Income from real property (such as rental income)	\$ N/A	\$ N/A	\$	\$
Interest and dividends	\$ N/A	\$ N/A	\$	\$
Gifts	\$ N/A	\$ N/A	\$	\$
Alimony	\$ N/A	\$ N/A	\$	\$
Child support	\$ N/A	\$ N/A	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Disability (such as social security, insurance payments)	\$ N/A	\$	\$	\$
Unemployment payments	\$ N/A	\$	\$	\$
Public-assistance (such as welfare)	\$ N/A	\$	\$	\$
Other (specify):	\$ N/A	\$	\$	\$
Total monthly income:	\$ 35	\$	\$	\$

2. *List your 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
SCCF	P.O.Box #279,	2014-present	\$ 35
	Clifton Tenn,		\$
			\$

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
N/A	N/A	N/A	\$ N/A
			\$
			\$

4. How much cash do you and your spouse have? \$ N/A

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
N/A	N/A	\$ N/A	\$ N/A
		\$	\$
		\$	\$

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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

Home	Other real estate	Motor vehicle #1
(Value) \$ N/A	(Value) \$ N/A	(Value) \$ N/A
		Make and year:
		Model:
		Registration #:

Motor vehicle #2	Other assets	Other assets
(Value) \$	(Value) \$	(Value) \$
Make and year:	N/A	N/A
Model:		
Registration #:		

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
N/A	\$ N/A	\$ N/A
	\$	\$
	\$	\$
	\$	\$

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

Name [or, if under 18, initials only]	Relationship	Age
N/A	N/A	N/A

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, semiannually, or annually to show the monthly rate.

	You	Your Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$	\$
Are real estate taxes included? ☐ Yes ☐ No	N/A	N/A
Is property insurance included? ☐ Yes ☐ No		

Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ N/A	\$ N/A
Home maintenance (repairs and upkeep)	\$ N/A	\$ N/A
Food	\$ \$20	\$
Clothing	\$ N/A	\$
Laundry and dry-cleaning	\$ N/A	\$
Medical and dental expenses	\$ \$10	\$
Transportation (not including motor vehicle payments)	\$ N/A	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ \$5	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	\$ N/A	\$
Life:	\$ N/A	\$
Health:	\$ N/A	\$
Motor vehicle:	\$ N/A	\$
Other:	\$ N/A	\$
Taxes (not deducted from wages or included in mortgage payments) (specify): Backup withholding	\$ \$10.50	\$
Installment payments		
Motor Vehicle:	\$ N/A	\$
Credit card (name):	\$ N/A	\$
Department store (name):	\$ N/A	\$
Other:	\$ N/A	\$
Alimony, maintenance, and support paid to others	\$ N/A	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ N/A	\$
Other (specify):	\$ N/A	\$
Total monthly expenses:	\$ 45.50	\$

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 spent — or will you be spending — any money for expenses or attorney fees in connection with this lawsuit? ☒ Yes ☐ No

If yes, how much? \$ \$150 for copies + \$14 for postage

11. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

I am incarcerated and make \$35 a month, and must pay for
for own hygiene, food, and stamps and other basic necessities

12. State the city and state of your legal residence.

Clifton , Tennessee

Your daytime phone number: () N/A

Your age: 39 Your years of schooling: 9

Last four digits of your social-security number: N/A