

In the
SUPREME COURT OF THE UNITED STATES

ISAAC JEROME SMITH,

Petitioner,

v.

UNITED STATES OF AMERICA,

Respondent.

No. _____

**MOTION FOR LEAVE TO
PROCEED IN FORMA PAUPERIS**

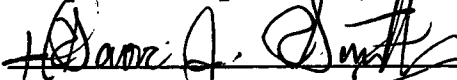
COMES NOW, Isaac J. Smith, an indigent pro se federal prisoner, and respectfully moves this Court for leave to proceed in forma pauperis, pursuant to Supreme Court Rule 39.

In support thereof, Smith has appended (a) an affidavit in support of his pauper status, (b) a completed pauperis form, and (c) the past six months print-out of his prison financial account.

Smith has previously been granted leave to proceed in forma pauperis in both the United States District Court for the Northern District of Florida, and the United States Court of Appeals for the Eleventh Circuit.

24 day of April, 2018

Respectfully submitted,



Isaac J. Smith #06384-017

F.C.I. Miami Low

P.O. Box 779800

Miami, Florida 33177

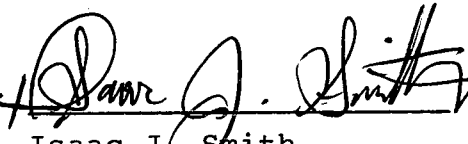
pro se

AFFIDAVIT IN SUPPORT OF MOTION FOR LEAVE TO PROCEED
IN FORMA PAUPERIS PURSUANT TO SUPREME COURT RULE 39

I, Isaac J. Smith, an indigent pro se federal inmate, do hereby swear and affirm under 28 U.S.C. §1746, 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/affirm under penalty of perjury under the United States laws, that my answers on the accompanying form are true and correct, and I have included herewith a copy of the last six months printout of my prison financial account to confirm such.

24 day of April 2018

By: 
Isaac J. Smith
pro se

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

I, Isaac J. Smith, 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	\$ 175.00	\$ 0	\$ 175.00	\$ 0
Self-employment	\$ 0	\$ 0	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 0
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ 0	\$ 0	\$ 0
Disability (such as social security, insurance payments)	\$ 0	\$ 0	\$ 0	\$ 0
Unemployment payments	\$ 0	\$ 0	\$ 0	\$ 0
Public-assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0
Other (specify):	\$ 0	\$ 0	\$ 0	\$ 0
Total monthly income:	\$ 175.00	\$	\$ 175.00	\$

* Amounts are estimates. See attached prison statements.

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
FCI Miami	(I have been incarcerated for more than a decade.)		\$
			\$
			\$

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			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ see attached commissary stmt.
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 - 0 -

☐ Other real estate
Value - 0 -

☐ Motor Vehicle #1
Year, make & model - 0 -
Value

☐ Motor Vehicle #2
Year, make & model - 0 -
Value

☐ Other assets
Description - 0 -
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

— 0 —

\$ — 0 —

\$ — 0 —

\$ _____

\$ _____

\$ _____

\$ _____

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

Name

Relationship

Age

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, or annually to show the monthly rate.

You

Your spouse

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

\$ N/A

\$ N/A

Are real estate taxes included? ☐ Yes ☐ No

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

\$ see commissary statement.

Clothing

\$ N/A

\$ N/A

Laundry and dry-cleaning

\$ N/A

\$ N/A

Medical and dental expenses

\$ N/A

\$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>N/A</u>	\$ <u>N/A</u>
Life	\$ <u>N/A</u>	\$ <u>N/A</u>
Health	\$ <u>N/A</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>N/A</u>	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>N/A</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>N/A</u>	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>N/A</u>	\$ _____	\$ _____
Total monthly expenses:	\$ <u>(See commissary statement; less than \$50 per month.)</u>	

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? _____

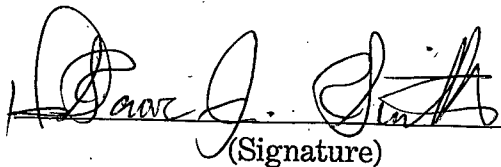
If yes, state the person's name, address, and telephone number:

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

I have been incarcerated for more than a decade and have no financial support other than the small amount of money I earn working for UNICOR within the prison.

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

Executed on: April 24, , 2018


(Signature)