Suprema Court, U.S. FILED

JAN 03 2020

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES RECEIVED VS. JUN 23 2020 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:

the following court(s): L.S. urcust Court y Dallah (19-1535)
☐ 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:
☐ a copy of the order of appointment is appended.
District of Columbia: \$S
District of Columbia: \$8 Subseribed & Sworn to before me this 18th date of 2020 My Commission Expires: 04/38/2020 (Signature) Notary Public

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

I, ICATO Complete, 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.

	verage monthly amount during he past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	***	\$. \$	\$
Self-employment	\$	\$	\$	\$
Income from real proper (such as rental income)		_ \$. \$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$. \$	\$
Alimony	\$	\$. \$	\$
Child Support	\$	\$	\$	\$
Retirement (such as soc security, pensions, annuities, insurance)	ial \$ <u>3,100</u>	\$	\$	\$
Disability (such as social security, insurance payr		<u> </u>	\$	 \$
Unemployment payments	5 \$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	 \$	\$	\$	\$
Total monthly inc	ome: \$	\$	\$	_ \$

Employer	Address	Dates of Employment	Gross monthly pay
		· ·	\$
			3
3. List your spous (Gross monthly	se's employment histo pay is before taxes or	ry for the past two years other deductions.)	, most recent employer fi
Employer	Address	Dates of Employment	Gross monthly pay
			3
	4		\$
•			*
Below, state an institution.	do you and your spous y money you or your g., checking or savings	spouse have in bank accounts) Amount you have	Amount your spouse ha
Below, state an institution.	y money you or your g., checking or savings	spouse have in bank accounts) Amount you have	•
Below, state and institution. Type of account (e. Checking) List the assets, and ordinary how	y money you or your g., checking or savings	spouse have in bank accounts) Amount you have	Amount your spouse has \$ \$ \$_ e owns. Do not list clothing
Below, state any institution. Type of account (e. CHECLES) List the assets, and ordinary how home Value	g., checking or savings and their values, which usehold furnishings.	spouse have in bank accounts Amount you have \$\$ \$\$ ch you own or your spouse Other real estat Value	Amount your spouse ha \$ \$ \$ e owns. Do not list clothing
Below, state and institution. Type of account (e. CHECKLY) 5. List the assets, and ordinary how Value Wotor Vehicle #1	g., checking or savings and their values, which usehold furnishings.	spouse have in bank accounts Amount you have \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount your spouse has \$ \$ \$ cowns. Do not list clothing
Below, state an institution. Type of account (e. C.	g., checking or savings and their values, which usehold furnishings.	spouse have in bank accounts Amount you have \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount your spouse has \$ \$ \$ owns. Do not list clothing e
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Below, state an institution. Type of account (e. C.	g., checking or savings and their values, which usehold furnishings.	spouse have in bank accounts Amount you have \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount your spouse has \$ \$ \$ owns. Do not list clothing e

State every person, business amount owed.	s, or organization or	ving you or your s	pouse money, and the	
Person owing you or Amount owed to you your spouse money		Amount	owed to your spouse	
State of Illenois	\$ UNSPECT, and	\$	•	
State of Wiscinsin	sunspecifie d	\$		
Veterans Odmenstation	\$ zenspecifie	√		
7. State the persons who rely on	vou or vour spouse fe	or support For min	or children list initials	
instead of names (e.g. "J.S." in	stead of "John Smith	").	or emaren, nst mitais	
Name	Relationship	_	Age	
8. Estimate the average monthly paid by your spouse. Adjust annually to show the monthly Rent or home-mortgage payment (include lot rented for mobile hor Are real estate taxes included? Is property insurance included? Utilities (electricity, heating fuel,	t any payments that rate. t me) Yes No Yes No	your family. Shows are made weekly, by You	separately the amounts biweekly, quarterly, or Your spouse \$	
water, sewer, and telephone)		\$ 100	\$	
Home maintenance (repairs and u	ıpkeep)	\$ 200.00	\$	
Food		\$ 300 w \$ 300 w	\$	
Clothing		\$/00000	\$	
Laundry and dry-cleaning		\$ 10000	\$	
Medical and dental expenses		\$ - 0 0	\$	
	•		· . \	

	You	Your spouse
Transportation (not including motor vehicle payments)	<u>\$</u>	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 400 cm	\$
Insurance (not deducted from wages or included in mort	gage 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:	\$	\$

liabilities during the next 12 months?	r
Yes No If yes, describe on an attached sheet. The federal Government federal perository and the U.S. Dressury has spolen of Stripping	T.V.
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	L
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 a typist) any money for services in connection with this case, including the completion of the form?	or nis
☐ 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 the Veteral administration has Committeed from the documentation	je.
I declare under penalty of perjury that the foregoing is true and correct. Executed on: 20 20	
Licerdo Harpes	
District of Columbia: SS Subscribed & Sworn to before me this #/ date of May 20 20 Notary Public	
My Commission Evniras All Mara	