21-6233

No. \_21-3053

19-3053

## IN THE

SUPREME COURT OF THE UNITED STATES	
MOTION FOR LEAVE TO PROCEED IN FORMA PAU.  The petitioner asks leave to file the attached petition for a 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 formation of the following court(s):	writ of certiorari  AUG 17 2021  OFFICE OF THE CLERK
☐ Petitioner has <b>not</b> previously been granted leave to pr pauperis in any other court.  ☐ Petitioner's affidavit or declaration in support of this motion is ☐ Petitioner's affidavit or declaration is <b>not</b> attached because appointed counsel in the current proceeding, and: ☐ The appointment was made under the following provision of	attached hereto. the court below

 $\square$  a copy of the order of appointment is appended.

(Signature)

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

, —		Rodriguez			the petit							
my motio	on to	proceed in	ı forma	pauperis	s, I state	that	because	of my	poverty	I am	unable to	o pay
the costs	of th	is case or	to give	security	therefor;	and	I believe	e I am	entitled 1	to rec	iress.	

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.

	Average monthly amount during the past 12 months			cted
	You	Spouse	You	Spouse
Employment	<b>\$_17.</b> 84	\$	\$	\$
Self-employment	\$n/a	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	<b>\$</b> 0	\$	\$	\$
Alimony	\$0	\$	\$	\$
Child Support	\$	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$	\$	\$	\$ <u>.</u>
Disability (such as social security, insurance payments)	\$	\$	<b>\$</b>	\$
Unemployment payments	\$0	\$	\$	\$
Public-assistance (such as welfare)	\$0	\$	\$	\$
Other (specify):	<b>\$</b>	\$	\$	\$
Total monthly income:	\$0	\$	\$	\$

Employer	Address	Dates of Employment	Gross monthly pay
n/a			
		· · · · · · · · · · · · · · · · · · ·	\$ \$
	e's employment histor pay is before taxes or		, most recent employer fir
Employer n/a	Address	Dates of Employment	Gross monthly pay
li/a			\$ \$
institution.  Type of account (e.	y money you or your ; g., checking or savings	s) Amount vou have	unts or in any other financ  Amount vour spouse has
Below, state any institution.  Type of account (e.	y money you or your ; g., checking or savings	spouse have in bank accors  Should be a specific and a specific an	unts or in any other financ  Amount vour spouse has
Below, state any institution.  Type of account (e. n/a  5. List the assets, and ordinary how	g., checking or savings and their values, which	spouse have in bank accords  Amount you have  \$\$  \$\$  ch you own or your spous  Other real esta	Amount your spouse has  \$ \$ e owns. Do not list clothi
Below, state any institution.  Type of account (e. n/a  5. List the assets, and ordinary how Walue \$15,000	g., checking or savings and their values, which usehold furnishings.	spouse have in bank accords  Amount you have  \$\$  \$\$  ch you own or your spous  Other real esta  Value	Amount your spouse has \$ \$ e owns. Do not list clothi
Below, state any institution.  Type of account (e. n/a  5. List the assets, and ordinary how Walue \$15,000	g., checking or savings  and their values, which is the same of th	spouse have in bank accords  Amount you have  \$\$  \$\$  ch you own or your spous  Other real esta  Value	Amount your spouse has \$se owns. Do not list clothing te

6. State every person, bu amount owed.	siness, or organization	owing you or yo	ur spouse money, and the
Person owing you or your spouse money	Amount owed to y	ou Amo	unt owed to your spouse
n/a	\$	. \$	
	\$	. \$	
	\$	. \$	
7. State the persons who re instead of names (e.g. "J.	ely on you or your spouse S." instead of "John Smi	for support. For	minor children, list initials
Name n/a	Relationshi <sub>l</sub>	D	Age
8. Estimate the average more paid by your spouse. A annually to show the more	Adjust any payments the	at are made week	dy, biweekly, quarterly, or  Your spouse
Rent or home-mortgage pay (include lot rented for mobilishment of the control of	le home) ided?	\$ <u>n/a</u>	•
Utilities (electricity, heating water, sewer, and telephone		<b>\$</b> n/a	<b></b> \$
Home maintenance (repairs	and upkeep)	\$n/a	
Food		\$ <u>n/a</u>	\$
Clothing		\$ <u>n/</u> a	\$
Laundry and dry-cleaning		\$n/a	
Medical and dental expense	s	\$n/a	\$

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

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? $\square$ Yes $\square$ 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 of a typist) any money for services in connection with this case, including the completion of this form?
	☐ Yes           No
	If yes, how much?
If y	ves, 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 am incarcerated and make only \$1.50 per day working in the Unicor prison factory, and I don't have money to pay a lawyer.
I de	eclare under penalty of perjury that the foregoing is true and correct.
	ecuted on:October 28,, 20 21_
	(Signature)