

25-5664

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SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S.
FILED

AUG 20 2025

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IN THE
SUPREME COURT OF THE UNITED STATES

Amy Bishop Anderson PETITIONER
(Your Name)

VS.

State of Alabama — 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:

Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s): US District Court, Northern District of Al
District Ct. No. 5:25-cv-00210-MHT-SFC Hugo L Black Courthouse, 1729 8th Ave. N.
Birmingham AL 35203
Appeal No. 25-11928-G United States 11th Circuit Court
56 Forsyth St. NW, Atlanta GA 30303

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.
Was granted *in forma* = Dist Ct. and had *in forma* at 11th Circ.

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: _____
_____, or

a copy of the order of appointment is appended.

Amy Bishop Anderson
(Signature)

U.S. Supreme Court

FRAP Form 4.

Affidavit Accompanying Motion for Permission to Appeal In Forma Pauperis

United States District Court for the Northern District of AL Dist. Ct. No. 5:25-cv-00210-MH-T-SEC
11th Cir. Ct. Appeal No. 25-11928-G

A. B., Plaintiff Amy Bishop Anderson

v.

Case No. _____

C. D., Defendant State of Alabama

Instructions: Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Affidavit in Support of Motion

I swear or 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 or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Date: 8/19/25

Signed: Amy Bishop Anderson

My issues on appeal are: My new evidence confirming steroid psychosis abrogating intent

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.*

See petition to US S. Ct.

Income Source	Average monthly amount during the past 12 months	Amount expected next month		
	You	Spouse	You	Spouse
Employment	\$ <u>0</u>	\$ <u>2500</u>	\$ <u>0</u>	\$ <u>2500</u>
Self-employment	\$ <u>0</u>	\$ <u>2500</u>	\$ <u>0</u>	\$ <u>2500</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interests and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as Social Security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as Social Security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>prison acct \$</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>0</u>	\$ <u>2500</u>	\$ <u>0</u>	\$ <u>2500</u>

*prison acct \$1 amertized ← See (1 month prison acct)
amount for ake, monthly deposit since, (prison acct)
Rev.: 12/09 is \$1000*

I use it for medical/dental copays, stamps, manila env, hygiene, phonicals etc.

2. List your employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross Monthly Pay
Liberty Tutwiler Prison, for Women	8946 US Highway 231 Wetumpka AL 36092	2014-2025	0

3. List your spouse's employment history, most recent employer first. (Gross monthly pay is before taxes or other deductions)

Jim Anderson	2103 McDowell Dr	2020-25	21500
Self employed	Huntsville AL		

a locksmith in security 35803

who hires his services to various companies. me

4. How much cash do you and your spouse have? \$ PMOD acct n/00 spouse unknown usually very little \$100

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
Redstone Credit Union	Checking	\$ 0	\$ unknown but usually very little
		\$	\$ 100 or overdrawn
		\$	\$

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.

I will attach 2 mo. PMOD acct and ask Business Officer to sign.

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

Home (Value)

~200K

Other Real Estate (Value)

~200K

Motor Vehicle #1 (Value)

Make & Year: Dodge Caravan

Model: ~ yr 2010

Registration #: unknown, #

Other Assets (Value)

but old and in disrepair as when
I was free ~2010 I was the bread
winner

Other Assets (Value)

→

Motor Vehicle #2 (Value)

Make & Year: daughter's car

Model: unknown

Registration #: unknown

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money

n one

Amount owed to you

0

Amount owed to your spouse

0

at home relying on spouse for free housing & food while they finish college, and start their careers

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

Name

Relationship

Age

Lily Anderson

daughter

8/11/91

Thea Anderson

daughter

5/31/93

Phaedra Anderson

daughter

5/18/95

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.

For home-mortgage payment (include lot rented for mobile home)

Are real-estate taxes included? Yes No

Is property insurance included? Yes No

Utilities (electricity, heating fuel, water, sewer, and telephone) form phone only to call Mom, Jim children

\$ 30 ~350 amortized

Home maintenance (repairs and upkeep)

\$ 0 ~200 to keep

Food

\$ 0 it running

Clothing

\$ 0 ~800 - 5 adults

Laundry and dry-cleaning

\$ 0 ~0 including

Medical and dental expenses

\$ 8 >100 Lily's

Transportation (not including motor vehicle payments)

\$ 0 ~100 gas, travel

Recreation, entertainment, newspapers, magazines, etc.

\$ 0 0 + jobs

Insurance (not deducted from wages or included in mortgage payments)

\$ 0 0

Homeowner's or renter's

\$ 0 0

Life

\$ 0 0

Health

\$ 0 ~300 including

Motor Vehicle

\$ 0 ~100 Lily's

Other:

\$ 0 minimum insurance

Taxes (not deducted from wages or included in mortgage payments) (specify):

\$ 0 0

Installment payments

\$ 0 0

Motor Vehicle

\$ 0 0

Credit card (name):

\$ 0 0

Department store (name):

\$ 0 0

Other:

\$ 0 0

Alimony, maintenance, and support paid to others

\$ 0 0

Regular expenses for operation of business, profession, or farm (attach detailed statement)

\$ 0 0

Other (specify): form, ~~stamps, envelope~~ coffee (phone call & sandal) 1/270

\$ 0 50 maintenance of van, tools, certificates

\$ unknown

\$ 2600

Total monthly expenses

\$ 98 2600

~~dental copays~~ → See 12 month printout (prison exec)

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 docket fees for your appeal.

My writer friend Rob Dinsmore sent me money for my prison act faithfully. Now my mother has taken over, but she does not know how much or how long she can support me as she is selling her house and buying a condo to downsize.

13. State the address of your legal residence.

Amy Bishop Anderson, ALS #285694,
Tutwiler Prison for Women, Dorm B-13
8964 US Highway 23
Wetumpka, AL 36092

Your daytime phone number: (N/A)

Your age: 2/4/68

Your years of schooling:

Ph.D. Genetics
Unknown except for last 4 digits for
PIN#. Not allowed to put PIN# on any
paper work.

(As amended Apr. 24, 1998, eff. Dec. 1, 1998.)