No. 25-5727 ORGINAL

Supreme Court, U.S.
FILED

APR - 6 2025

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

Aaron Smith	— PETITIONER
(Your Name)	

VS.

People of the State of Illinois 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	Petitioner has previously been granted leave to proceed in forma pauperis in following court(s):
	Illinois First District Appellate Court
÷	Illinois Supreme Court
par	Petitioner has not previously been granted leave to proceed <i>in forma</i> uperis in any other court.
	Petitioner's affidavit or declaration in support of this motion is attached hereto.
арр	Petitioner's affidavit or declaration is not attached because the court below pointed 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.
	Oaron Smith # 435418
	(Signature)

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

	I, _	Han	on Sm	ith	, am	the petit	ioner	in the a	above-e	entitled	case.	In supp	ort of
my	mot	ion to	proceed	l in forma	pauperis,	I state	that k	oecause	of my	poverty	/ I am	unable t	ю рау
the	cost	ts of th	nis case	or to give	security t	herefor;	and I	believe	I am	entitled	to rec	dress.	•

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 amne past 12 months	nount during	Amount expenses next month	ected
	You	Spouse	You	Spouse
Employment	\$	\$ N/A	\$	\$N/A
Self-employment	\$	\$_\frac{\gamma/A}{}	\$	\$ N /A
Income from real propert (such as rental income)		\$_\(\alphi/A\)	\$	\$_ <i>N</i> //
Interest and dividends	\$	\$ N/A	\$	\$ N/A
Gifts	\$ <u> </u>	\$ N/A	\$Ø	\$ <u>. N)A</u>
Alimony	\$\$	s N/A	\$Ø	\$_N/A
Child Support	\$ \	\$ N/A	\$	\$_N/A_
Retirement (such as soc security, pensions, annuities, insurance)	ial \$ <u></u>	\$ <u>\N\A</u>	\$	\$_N/A
Disability (such as socia security, insurance pay		\$_N/A	\$	\$_ <i>N/A</i>
Unemployment payment	s \$	\$ N/A	\$ Ø	\$ N/A
Public-assistance (such as welfare)	\$	\$ <u>~//A</u>	\$ <u>Ø</u>	\$_ <i>N/A</i>
Other (specify): None	\$	\$_ <i>N/A</i> _	\$	s_P/A
Total monthly in	come: \$	sN/A	\$_ <i></i>	s_ N/A_

Employer	Address	Dates of Employment	Gross monthly pay
N/A			\$
			\$
***************************************			\$
	e's employment histor oay is before taxes or		s, most recent employer f
Employer	Address	Dates of	Gross monthly pay
N/X		Employment	¢
10/12	·		. \$
			\$ \$
			· · · · · · · · · · · · · · · · · · ·
. How much cash Below, state any institution.	money you or your	: Amount you have	ounts or in any other finar Amount your spouse ha
. How much cash Below, state any institution.	money you or your	spouse have in bank acco Amount you have	ounts or in any other finar Amount your spouse ha
I. How much cash Below, state any institution.	on Type of account	spouse have in bank acco Amount you have	ounts or in any other finar
How much cash Below, state any institution. Financial institution ONL List the assets,	on Type of account	spouse have in bank acco Amount you have \$\$ \$\$	Amount your spouse has \$\$
How much cash Below, state any institution. Financial institution Chile List the assets, and ordinary hor	n Type of account	spouse have in bank acco Amount you have \$\$ \$\$ ch you own or your spous	Amount your spouse has \$ssse owns. Do not list cloth
How much cash Below, state any institution. Financial institution List the assets, and ordinary how	and their values, which	spouse have in bank according to the series of the series	Amount your spouse has \$sse owns. Do not list clothate
How much cash Below, state any institution. Financial institution Colored List the assets, and ordinary hore	and their values, which	spouse have in bank acco Amount you have \$\$ \$\$ ch you own or your spous	Amount your spouse has \$sse owns. Do not list clothate
How much cash Below, state any institution. Financial institution List the assets, and ordinary hou Home Value	n Type of account	Spouse have in bank according to the series of the series	Amount your spouse has \$s \$s se owns. Do not list cloth
How much cash Below, state any institution. Financial institution List the assets, and ordinary how Walue	money you or your to money you or your to money you or your to money and their values, which is the property of the property o	Spouse have in bank according to the series of the series	Amount your spouse has \$ss se owns. Do not list clothate when the same second at t
How much cash Below, state any institution. inancial institution. List the assets, and ordinary how Walue	and their values, which asehold furnishings.	Amount you have S	Amount your spouse has \$ssse owns. Do not list clothate model
How much cash Below, state any institution. Financial institution List the assets, and ordinary how Walue	and their values, which asehold furnishings.	Spouse have in bank according to the series of the series	Amount your spouse has \$sssse owns. Do not list clothate#2 model^One
I. How much cash Below, state any institution. Financial institution C. List the assets, and ordinary hou Home Value Nowe Motor Vehicle #1 Year, make & me	and their values, which asehold furnishings.	Amount you have S	Amount your spouse has \$sssse owns. Do not list clothate#2 model^One

Person owing you or your spouse money	Amount owed to y	/ou	Amoun	t owed to	your spouse
NONE	\$	_	\$		<u>. </u>
	\$		\$		
	\$	_	\$		·
7. Ct -t - th	aler on real on really about	o for suppo	t		•
7. State the persons who re Name NONE	Relationshi		. t.	Age	
annually to show the mo	Adjust any payments thonthly rate.	You			r spouse
annually to show the mo	onthly rate. Syment ile home)	You	U) Ne		
annually to show the mo	nthly rate. yment ile home) uded? Yes No	You			
Rent or home-mortgage pa (include lot rented for mob Are real estate taxes include	eyment ile home) uded?	You			
Rent or home-mortgage pa (include lot rented for mob Are real estate taxes include lot insurance included the contraction of th	eyment ile home) uded?	You			N/A
Rent or home-mortgage pa (include lot rented for mob Are real estate taxes include lot property insurance includities (electricity, heatin water, sewer, and telephon Home maintenance (repairs	eyment ile home) uded?	You \$/ \$		You \$ \$ \$	N/A N/A
Rent or home-mortgage pa (include lot rented for mob Are real estate taxes include lot property insurance including the property insurance includities (electricity, heating water, sewer, and telephone Home maintenance (repairs)	eyment ile home) uded?	You \$/ \$		Your _ \$ \$ \$	N/A
Rent or home-mortgage pa (include lot rented for mob Are real estate taxes include Is property insurance including the sewer, and telephone Home maintenance (repairs Food	eyment ile home) uded?	You \$/ \$		You \$ \$ \$	N/A N/A

•	•				
			You	Your spouse	•
		Transportation (not including motor vehicle payments)	\$	\$ N/A	_
		Recreation, entertainment, newspapers, magazines, etc.	\$	s NIA	· - .
		Insurance (not deducted from wages or included in mortg	gage payments)		
		Homeowner's or renter's	\$	sN/A	- - '':
٠		Life	\$	s N/A	<u>-</u>
•		Health	\$	\$ N/A	-
	•	Motor Vehicle	\$	s N/A	- , ,
		Other:	\$	\$ N/A	· .
		Taxes (not deducted from wages or included in mortgage	e payments)		
		(specify):	\$ \	\$_ W/A_	_
	•	Installment payments			
		Motor Vehicle	\$	\$ P/A	
		Credit card(s)	\$	\$ N/A	-
		Department store(s)	s	\$ N/A	· .
		Other:	\$	s N/A	_
		Alimony, maintenance, and support paid to others	\$	s_N/A_	_
		Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	sN/A	
		Other (specify):	\$ Ø	\$ N/A	_
.*		Total monthly expenses:	s�	s_N/A	· . :

	Do you expect liabilities durin				ly income o	r expenses o	in your as	sets or
	□ Vác. □	No I	f yes, describ	on an att	ached sheet	•		
	L les L	1110 1.	r yes, descri	e on an acc	actica stice	, <u>.</u>	·	
								•
			*		•			
10.	Have you paid with this case,						ces in conn	ection
	If yes, how mu	ıch?						
	•		•					
	If yes, state th	ie attorney	7's name, add	ress, and te	lephone nu	mber:		
11.	Have you paid a typist) any n form?	noney for s	rou be paying services in co	—anyone o nnection wi	ther than a ith this case	n attorney (si e, including th	ıch as a par ıe completio	alegal or on of this
	i res	(X 1/0	•	**				
	If yes, how mu	ıch?						
						•		
If	yes, state the p	erson's nar	ne, address, a	and telepho	ne number:			
		e e						
		•		•		•	*	
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12.	Provide any of	tner inform	nation that w	ın neip expi	ain wny you	ı cannot pay i	me costs of	ums case.
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T á	leclare under pe	analtar of n	aminument that t	ha faraccain	r ic twio on	d garroat		
1.0	ieciare under pe	enaity of p	erjury that t	ne for egoing	g is true an	a correct.		
r.	ecuted on:	April 6		2Ù	25			
Ľλ	recuted on.	DAIL 0		, 20				
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						Laugh Smi	M # 4739	5418
					· . — <u>C</u>			7710
						(Signa	iture)	

Additional material from this filing is available in the Clerk's Office.