IN THE	FILED
SUPREME COURT OF THE UNITED STATES	OCT 2 0 2025
SUFFICIENT COURT OF THE UNITED STATES	OFFICE OF THE CLE SUPREME COURT, U
JUAN MENDEZ — PETITIONER  (Your Name)	RIGIN
VS.	
UNITED STATES OF AMERICA — RESPONDENT(S)	·
MOTION FOR LEAVE TO PROCEED IN FORMA PAUPE	ERIS
The petitioner asks leave to file the attached petition for a wri without prepayment of costs and to proceed <i>in forma pauperis</i> .	t of certiorari
Please check the appropriate boxes:	
☑ Petitioner has previously been granted leave to proceed in form the following court(s):	na pauperis in
United States District Court, No. 2:06-cr-20387-1	·
United States Court of Appeals For The Sixth Circuit,	No. 25-5067
☐ Petitioner has <b>not</b> previously been granted leave to proceed pauperis in any other court.	eed in forma
🗵 Petitioner's affidavit or declaration in support of this motion is at	tached hereto.
☐ Petitioner's affidavit or declaration is <b>not</b> attached because the appointed counsel in the current proceeding, and:	e court below
☐ The appointment was made under the following provision of la	
☐ a copy of the order of appointment is appended.	, or
	1

(Signature)

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

	,		Mendez		$_{-}$ , am the	petitione	er in the	above-e	ntitled ca	ıse.	In supr	ort of
my	motio	n to pr	$\operatorname{oceed} in f$	orma par	<i>uperis</i> , I st	ate that	because	e of my	poverty I	am	unahle	to nav
tne	costs	of this	case or to	give sec	urity there	for; and	I believ	e I am e	entitled to	o red	dress.	1 0

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 Ave	rage monthly am past 12 months	ount during	Amount exp	ected
	You	Spouse	You	Spouse
Employment	\$ 30.00	\$0	\$ 30.00	\$
Self-employment	\$0	\$0	\$	\$
Income from real property (such as rental income)	\$0	\$0	<u> </u>	\$0
Interest and dividends	\$0	\$0	\$0	\$0
Gifts	\$0	\$0	\$0	\$0
Alimony	\$0	\$0	\$ <u> </u>	\$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 payment	\$0ts)	\$0	\$0	\$
Unemployment payments	\$0	\$0	\$0	\$0
Public-assistance (such as welfare)	\$0	\$	\$0	\$0
Other (specify):0	\$0	\$0	\$0	\$
Total monthly income	s: \$ <u>30.00</u>	\$0	\$_30.00	\$

Employer	Address	Dates of Employment	Gro	ss monthly pay
Bureau of Pr	isons <u>3625 FCI Ro</u>	and 1-2016 to pre	sent <b>\$</b> 3	30.00
0	0		\$	0
0	0	0	\$	0
3. List your spou (Gross monthly	se's employment history pay is before taxes or o	y for the past two years ther deductions.)	s, most re	cent employer f
Employer	Address	Dates of	Gro	ss monthly pay
NT / A	NT / A	Employment		
N/A	N/A	N/A		
N/A N/A	N/A N/A	N/A N/A	\$	N/A N/A
			Ψ	11/1/
N/A		_ \$N/A	\$ <u>N</u>	/A /A
NT / A		Δ NT / A		1.
N/A		\$N/A	\$N	/A
. List the assets,		\$N/A you own or your spous		/A
. List the assets, and ordinary hor	and their values, which	\$N/A	e owns.	/A
N/A  List the assets,	and their values, which usehold furnishings.	you own or your spous	e owns.	/A
N/A  List the assets, and ordinary hor Home ValueN  Motor Vehicle #1	and their values, which usehold furnishings.	S N/A  you own or your spouse  □ Other real estat  Value N/A  □ Motor Vehicle #	e owns.	/A Do not list cloth
N/A  List the assets, and ordinary hor Home ValueN  Motor Vehicle #1 Year, make & m	and their values, which usehold furnishings.  /A  l odelN/A	S N/A  you own or your spouse  □ Other real estate  Value N/A  □ Motor Vehicle #  Year, make & n	e owns. se A	/A Do not list cloth
N/A  List the assets, and ordinary hor Home ValueN  Motor Vehicle #1	and their values, which usehold furnishings.  /A  l odelN/A	S N/A  you own or your spouse  □ Other real estat  Value N/A  □ Motor Vehicle #	e owns. se A	/A
N/A  List the assets, and ordinary hor walueN  Motor Vehicle #1 Year, make & m Value N/A	and their values, which usehold furnishings.  /A  l odelN/A	S N/A  you own or your spouse  □ Other real estate  Value N/A  □ Motor Vehicle #  Year, make & n	e owns. se A	/A
N/A  List the assets, and ordinary how the North	and their values, which usehold furnishings.  /A  l odelN/A	S N/A  you own or your spouse  □ Other real estate  Value N/A  □ Motor Vehicle #  Year, make & n	e owns.	/A
N/A  List the assets, and ordinary hore Home ValueN  Motor Vehicle #1 Year, make & m ValueN	and their values, which usehold furnishings.  /A  l odelN/A  N/A	S N/A  you own or your spouse  □ Other real estate  Value N/A  □ Motor Vehicle #  Year, make & n	e owns.	/A

6. State every person, bu amount owed.	siness, or organizat	ion owing you or	your spo	use money, and the	
Person owing you or your spouse money	Amount owed	to you A	mount ov	ved to your spouse	
0	\$0	\$	0	<u> </u>	
0	\$0	\$	0		
0 ·	\$0	\$_	0		
7. State the persons who re instead of names (e.g. "J.	ly on you or your spo S." instead of "John	ouse for support. Smith").	For minor	children, list initials	
Name	Relation	ship	Ag	је	
N/A	N/A		N/A		
N/A	N/	<u>'</u> A	N/A		
N/A	N/	<b>'</b> A	N.	/A	
Rent or home-mortgage pay (include lot rented for mobile Are real estate taxes included Is property insurance included	e home) ded?  □ Yes  □ No		<u>erat</u> ed	Your spouse \$_N/A	
Utilities (electricity, heating water, sewer, and telephone)	fuel,	\$ Incarce		\$ <u>N/A</u>	
Home maintenance (repairs a Food	апа иркеер)			\$ <u>N/A</u> \$ <u>N/A</u>	
Clothing		§ Incarce	rated	\$N/A	
Laundry and dry-cleaning		\$ Incarce	rated	\$N/A	
Medical and dental expenses		<pre>\$ Incarce</pre>	rated	\$ N/A	

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

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? <u>Indigent</u>
If yes, state the attorney's name, address, and telephone number: N/A
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 ৷ No
If yes, how much?N/A
If yes, state the person's name, address, and telephone number: N/A
12. Provide any other information that will help explain why you cannot pay the costs of this case.  Incarcerated
I declare under penalty of perjury that the foregoing is true and correct.
Executed on:
X Juan Mendez (Giornatura)