

25-6023  
No.

ORIGINAL

In the  
Supreme Court of the United States

WORLDLY DIEAGO HOLSTICK,

*Petitioner,*

vs.

UNITED STATES OF AMERICA,

*Respondent.*

ON PETITION FOR WRIT OF CERTIORARI  
TO THE UNITED STATES COURT OF APPEALS  
FOR THE ELEVENTH CIRCUIT

MOTION FOR LEAVE TO PROCEED  
IN FORMA PAUPERIS

COMES NOW PETITIONER, Worldly Dieago Holstick, and respectfully moves this Honorable Court for leave to proceed in forma pauperis, in accordance with the provisions of Title 28, United States Code, Section 1915, and Rule 39 of the Rules of his Court.

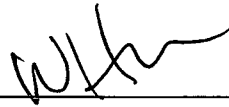
FILED

OCT 18 2025

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

The affidavit of Mr. Holstick in support of this motion is attached hereto. Mr. Holstick did seek leave to proceed *in forma pauperis* in the court below. Presented herewith is Mr. Holstick's petition for writ of certiorari in the Court of Appeals for the Eleventh Circuit.

Done this 18, day of October 2025.



Worldly Dieago Holstick  
Register Number 24370-111  
FCI Williamsburg  
P.O. Box 340  
Salters, SC 29590

No:

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**In the  
Supreme Court of the United States**

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WORLDLY DIEAGO HOLSTICK,

*Petitioner,*

vs.

UNITED STATES OF AMERICA,

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ON PETITION FOR WRIT OF CERTIORARI  
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**AFFIDAVIT IN SUPPORT OF  
MOTION FOR LEAVE TO PROCEED  
IN FORMA PAUPERIS**

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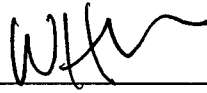
I, Worldly Dieago Holstick, being first duly sworn according to law, depose and say that I am the Petitioner in the above-entitled cause, and in support of my application for leave to proceed without being required I prepay costs or fees, state (A) because of my poverty I am unable to pay the cost of the cause; (B) I am unable to give security for the same;

(C) I believe that I am entitled to the redress I seek in the cause; (D) this review is sought in good faith; (E) the nature of the cause is briefly stated as a Petition for Writ of Certiorari to the United States Court of Appeals for the Eleventh Circuit; (F) the petition raises substantial questions of constitutional law, as set forth more fully in my Petition filed herewith.

I further swear that the responses which I have made to the questions and instructions below relating to my ability to pay the costs of prosecuting the appeal are true.

- 1) I am presently unemployed.
- 2) I have not received within the last 12 months any income from a business, profession or other form of self-employment, in the form of rent payments, interest, dividend, or other source.
- 3) I do not own cash or a checking or savings account.
- 4) I do not own any real estate, stocks, bonds, notes, automobiles, or other valuable property.
- 5) I have no persons dependent on me for support.
- 6) I have read the foregoing and state that it is true and correct.

Done this 10, day of October 2025.

A handwritten signature in black ink, appearing to read 'Worldly Dieago Holstick', written over a horizontal line.

Worldly Dieago Holstick  
Register Number 24370-111  
FCI Williamsburg  
P.O. Box 340  
Salters, SC 29590

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

I, Worldly Holstick, 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.

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Self-employment	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Income from real property (such as rental income)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Interest and dividends	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Gifts	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Alimony	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Child Support	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Disability (such as social security, insurance payments)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Unemployment payments	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Public-assistance (such as welfare)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Other (specify): _____	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
<b>Total monthly income:</b>	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross monthly pay
N/A			\$
			\$
			\$

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

Employer	Address	Dates of Employment	Gross monthly pay
	N/A		\$
			\$
			\$

4. How much cash do you and your spouse have? \$  
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
		\$	\$
		\$ N/A	\$
		\$	\$

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

<input type="checkbox"/> Home Value N/A	<input type="checkbox"/> Other real estate Value N/A
<input type="checkbox"/> Motor Vehicle #1 Year, make & model Value	<input type="checkbox"/> Motor Vehicle #2 Year, make & model Value
<input type="checkbox"/> Other assets Description N/A Value	

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

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
N/A	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

Name	Relationship	Age
_____	N/A	_____
_____	_____	_____
_____	_____	_____

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, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 0.00	\$ 0.00
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 0.00	\$ 0.00
Home maintenance (repairs and upkeep)	\$ 0.00	\$ 0.00
Food	\$ 0.00	\$ 0.00
Clothing	\$ 0.00	\$ 0.00
Laundry and dry-cleaning	\$ 0.00	\$ 0.00
Medical and dental expenses	\$ 0.00	\$ 0.00



	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0.00	\$ 0.00
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$ 0.00
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0.00	\$ 0.00
Life	\$ 0.00	\$ 0.00
Health	\$ 0.00	\$ 0.00
Motor Vehicle	\$ 0.00	\$ 0.00
Other: _____	\$ 0.00	\$ 0.00
Taxes (not deducted from wages or included in mortgage payments)	0.00	0.00
(specify): _____	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ 0.00	\$ 0.00
Credit card(s)	\$ 0.00	\$ 0.00
Department store(s)	\$ 0.00	\$ 0.00
Other: _____	\$ 0.00	\$ 0.00
Alimony, maintenance, and support paid to others	\$ 0.00	\$ 0.00
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ 0.00
Other (specify): _____	\$ 0.00	\$ 0.00
<b>Total monthly expenses:</b>	\$ 0.00	\$ 0.00

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 costs of this case.

Currently Incarcerated and I have no Income

I declare under penalty of perjury that the foregoing is true and correct.

Executed on: 10/10/2025, 20\_\_\_\_

WJH  
(Signature)