

FILED OCT 2 1 2025

OFFICE OF THE CLERK SUPREME COURT II'S

IN THE

SUPREME COURT OF THE UNITED STATES

In Re Joseph Cammarata PETITIONER
(Your Name)

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The petitioner asks leave to file the attached petition for a writ of mandamus without prepayment of costs and to proceed *in forma pauperis*.

Please check the appropriate boxes:

the	☐ Petitioner following cour	has previ	ously been g	granted	leave to	proceed	in forma	pauperis	in
pau	X Petitioner <i>peris</i> in any o	has not	previously	been	granted	leave (to proceed	l in for	ma

🔀 Petitioner's affidavit or declaration in support of this motion is attached hereto.

(Signature)

MICHAEL SOOF

OFFICE OF THE CLERK SUPREME COURT, U.S.

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

I, Soseph Cammalata, 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.

	e monthly amo	unt during	Amount expected next month		
	You	Spouse	You	Spouse	
Employment	s 49.50	s N/A	\$ <u>17.50</u>	\$ N/A	
Self-employment	\$	\$	\$	\$	
Income from real property (such as rental income)	\$	\$	\$	\$	
Interest and dividends	\$	\$	\$	\$	
Gifts	s 116.67	\$	\$	\$	
Alimony	\$	\$	\$	\$	
Child Support	\$	\$	\$	\$	
Retirement (such as social security, pensions, annuities, insurance)	\$	\$	\$	\$	
Disability (such as social security, insurance payments)	\$	\$	\$	\$	
Unemployment payments	\$	\$	\$	\$	
Public-assistance (such as welfare)	\$	\$	\$	\$	
Other (specify):	\$	\$	\$	\$	
Total monthly income:	\$_ 49.50	\$	<u>\$ 17.50</u>	\$	

Montgenery, AL 36112 mployment history for s before taxes or other Address	the past two years,	most recent employer i
mployment history for s before taxes or other	the past two years, deductions.) Dates of	most recent employer f
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Address		Gross monthly pay
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	(m_{i}^{\dagger}) is	
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N/H	•	
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h - 2	hecking or savings)	their values, which you own or your spouse old furnishings. Other real estate Value Motor Vehicle # Year, make & m Value N/A

Person owing you or your spouse money	Amount owed to ye	ou Amount o	owed to your spous
N/A	\$	\$	
	\$	\$	NAS-
THE CONTRACTOR OF THE CONTRACT	\$	\$	
7. State the persons who rely instead of names (e.g. "J.S."	on you or your spouse	for support. For min	or children, list initia
Name N/A	Relationship		Age
Estimate the average mont	hly ornonges of you on	d vous family Charre	a an a wat also the a amount
Estimate the average mont paid by your spouse. Adj annually to show the month	ust any payments tha		
		You	Your spouse
			Your spouse
nclude lot rented for mobile Are real estate taxes include	home) d? 🔲 Yes 🔲 No	You \$	Your spouse
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Include lot rented for mobile Are real estate taxes include Is property insurance include Itilities (electricity, heating for ater, sewer, and telephone) Home maintenance (repairs and area.)	home) d?	\$\$ \$\$	\$ \$ \$

•	You	Your spouse
Transportation (not including motor vehicle payments)	\$	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mort	gage payments)	
Homeowner's or renter's	\$	\$
Life	\$	\$
Health	\$ <u>``</u>	\$
Motor Vehicle	\$	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage	e payments)	
(specify):	\$	\$
Installment payments	₹	
Motor Vehicle	\$	\$
Credit card(s)	\$	\$
Department store(s)	\$	\$
Other:	18 (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$
Alimony, maintenance, and support paid to others	\$	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify): Rostitution	\$ 25.00 \$ 150.00	\$
Total monthly expenses:	\$ 150.00	\$

	pect any major changes to you during the next 12 months?	ar monthly income or expenses or in your assets or
☐ Yes	⊠No If yes, describe o	on an attached sheet.
with this	ease, including the completion	an attorney any money for services in connection of this form? ⊠ Yes □ No
If yes, ho	w much?	•
If yes, sta	te the attorney's name, addres Floyd J. Miller 16 Tavern Lane Sicklerville, NJ	s, and telephone number: (856) 388-7054 08081
		enyone other than an attorney (such as a paralegal or ection with this case, including the completion of this
✓ Yes	□ No	
If yes, ho	v much? 45,000.00	
Right	Dos and SEC ille	
I declare unde	r penalty of periury that the fo	oregoing is true and correct. // years
Executed on:	November 1st,	
		(Signature)

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