

No. **25-6305**

**ORIGINAL**

IN THE  
SUPREME COURT OF THE UNITED STATES

ANTHONY DARRELL HEATH, Petitioner.  
VS.

SUPERINTENDENT SCI FRACKVILLE, et al., Respondent's.

**FILED**

**JUL 25 2025**

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

**MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

To the Honorable Chief Justice and Justice's of this High-Court:

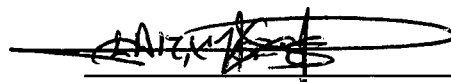
AND NOW I, your petitioner seek leave to file the attached petition for a writ of certiorari without prepayment of cost and to proceed *in forma pauperis*. In support of this request I aver the following points.

- I have paid the initial five-dollar filing fee to the United States District Court for the Eastern District of Pennsylvania at Civil No. 5:20-cv-03722-JMG. This receipt has been reported as *Heath v. Superintendent of SCI Mahanoy, et al.*, 2020 U.S. Dist. LEXIS 273937. December 18, 2020, Decided; December 18, 2020, Filed.
- I have previously been granted leave to proceed *in forma pauperis* in the United States Court of Appeals for the Third Circuit at civil action No. 20-cv-3722.
- My declaration in support of this motion is attached hereto.

WHEREBY, all considered, I seek a order granting this motion for the relief requested.

Anthony Darrell Michael Heath  
Moorish National  
Hb 2530121

Love Truth Peace,  
Freedom and Justice



Mr. Anthony Darrell Heath  
Moorish American and  
Beneficiary being Injured  
by the trust and trustees.

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

Anthony Daniel Michael Heath, non ens legi's  
I, ~~Anthony Daniel Michael Heath, Beneficiary~~, 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	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Self-employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Gifts	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Child Support	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>Prison Edu</u>	\$ <u>About 30.00</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<b>Total monthly income:</b>	\$ <u>About 30.00</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

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

Employer	Address	Dates of Employment	Gross monthly pay
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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.) *N/A N/A*

Employer	Address	Dates of Employment	Gross monthly pay
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

4. How much cash do you and your spouse have? \$ *N/A*  
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

☐ Home  
Value \_\_\_\_\_

☐ Other real estate  
Value \_\_\_\_\_

☐ Motor Vehicle #1  
Year, make & model \_\_\_\_\_  
Value \_\_\_\_\_

☐ Motor Vehicle #2  
Year, make & model \_\_\_\_\_  
Value \_\_\_\_\_

☐ Other assets  
Description \_\_\_\_\_  
Value \_\_\_\_\_

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

Person owing you or  
your spouse money

Amount owed to you

Amount owed to your spouse

\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith"). **N/A**

Name

Relationship

Age

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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. **N/A**

You

Your spouse

Rent or 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)

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Home maintenance (repairs and upkeep)

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Food

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Clothing

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Laundry and dry-cleaning

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Medical and dental expenses

\$ \_\_\_\_\_

\$ \_\_\_\_\_

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>N/A</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>N/A</u>	\$ <u>N/A</u>
Life	\$ <u>N/A</u>	\$ <u>N/A</u>
Health	\$ <u>N/A</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>N/A</u>	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>N/A</u>	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other: <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>PRISON UPKEEP</u> <span style="margin-left: 50px;">ERROR</span>	\$ <u><del>30.00</del></u> <span style="margin-left: 10px;">About</span>	\$ <u>N/A</u>
<u>Not Real Money!</u>	\$ <u><del>30.00</del></u> <span style="margin-left: 10px;">About</span>	\$ <u>N/A</u>
Total monthly expenses:	\$ _____	\$ _____

Exemption Account Number: #62530121

Public Social Security Number: 181704965

Accept For Value and Discharge Bill under #62530121.

Anthony Darrell Michael Heath. Moorish National ~~Per~~ Per  
Pro Per

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months? *N/A.*

☐ 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 *N/A.*

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? *N/A*

☐ Yes ☐ No

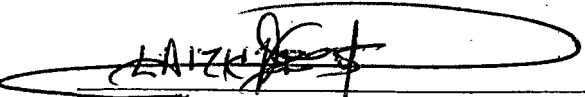
If yes, how much? \_\_\_\_\_

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.  
*Nothing Further, at this time.*

I declare under penalty of perjury that the foregoing is true and correct, *based on my own personal understanding.*  
Executed on: *July 25*, 20*25*

*Moerish National*  
*Anthony Darrell Michael Heath*  
*H62530121.*

  
(Signature)  
*Beneficiary* \_\_\_\_\_