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DOCKET NO. \_\_\_\_\_

ORIGINAL

UNITED STATES SUPREME COURT

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JAN 20 2026

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SUPREME COURT, U.S.

WILLIAM MAXWELL,

Petitioner/Appellant/Plaintiff,

VS.

COMMISSION FOR LAWYER DISCIPLINE

Respondent/Appellee/Defendant.

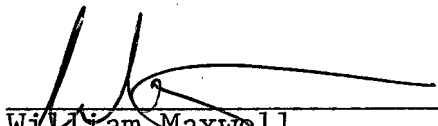
**MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS**

William Maxwell requests leave to file the enclosed Petition for Certiorari without prepayment of costs and to proceed in forma pauperis.

William Maxwell proceeded pro se' before the Texas Supreme Court and BODA and no fees were required.

William Maxwell's affidavit or declaration in support of this motion is attached hereto, along with 6 months printout of his commissary account.

Respectfully submitted,

  
\_\_\_\_\_  
William Maxwell  
Fed. Reg. No. 71944-279  
FCI Beaumont Low  
P.O. Box 26020  
Beaumont, Texas 77720  
Pro se'

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SUPREME COURT, U.S.

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UNITED STATES SUPREME COURT  
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WILLIAM MAXWELL,  
Petitioner/Appellant/Plaintiff,  
VS.

COMMISSION FOR LAWYER DISCIPLINE  
Respondent/Appellee/Defendant.  
\_\_\_\_\_

ON PETITION FOR CERTIORARI TO THE TEXAS SUPREME COURT  
RE: CASE NO. 25-0191 MAXWELL v. CLD  
\_\_\_\_\_

**ADDENDUM TO MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS**  
\_\_\_\_\_


Maxwell proceeded pro se' before the Texas Supreme Court and Board of Disciplinary Appeals (BODA). These are no-fee proceedings and Maxwell did not seek to proceed in forma pauperis as the proceedings below are no-fee proceedings.

The BODA action is a collateral action based on Maxwell's conviction out of the United States v. William Maxwell, Cause No. 11-740-RBK, out of the United States District Court, District of New Jersey. Maxwell sought and was approved to proceed in forma pauperis in the New Jersey case, and was appointed C.J.A. counsel. The Third Circuit also found Maxwell to be indigent on the appeal of this underlying matter and approved Maxwell to proceed with C.J.A. counsel. See United States v. William Maxwell, Cause No. 15-2925. The United States Supreme Court

approved Maxwell's application to proceed in forma pauperis in this underlying matter. See Maxwell v. United States, 23-7404.


In an unrelated more recent matter, the United States District Court, Eastern District of Texas, on application thereof, found Maxwell to be indigent and allowed him to proceed in forma pauperis in Cause No. 1:22-CV-00040-MJT-CLS. The Fifth Circuit allowed Maxwell to proceed in forma pauperis on Magistrate Stetson's approval of Maxwell's in forma pauperis status in Maxwell v. Warden, FCI-Beaumont-Low, Cause No. 23-40699.

Respectfully submitted,

  
William Maxwell  
Fed. Reg. No. 71944-279  
FCI Beaumont Low  
P.O. Box 26020  
Beaumont, Texas 77720  
Pro se'

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

Executed on Apr. 17, 2026.

  
William Maxwell

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

I, William Maxwell, 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	\$ n/a	\$ 0.00	\$ n/a
Self-employment	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Income from real property (such as rental income)	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Interest and dividends	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Gifts **	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Alimony	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Child Support	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Disability (such as social security, insurance payments)	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Unemployment payments	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Public-assistance (such as welfare)	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
Other (specify): _____	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a
<b>Total monthly income:</b>	\$ 0.00	\$ n/a	\$ 0.00	\$ n/a

\*\* Please see attached Commissary Report for last 6 months

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? \$ 0.00  
 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
n/a	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

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

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.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
_____	\$ 0.00	\$ n/a
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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").

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	\$ n/a
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	\$ n/a
Home maintenance (repairs and upkeep)	\$ 0.00	\$ n/a
Food	\$ 0.00	\$ n/a
Clothing	\$ 0.00	\$ n/a
Laundry and dry-cleaning	\$ 0.00	\$ n/a
Medical and dental expenses	\$ 0.00	\$ n/a

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

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? \_\_\_\_\_

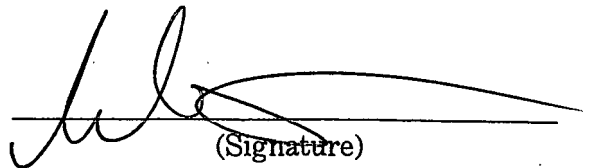
If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the costs of this case.

I have been continuously incarcerated for the last 12 years.

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

Executed on: January 20, 2026

  
(Signature)