No. 26-5010 ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES



Michael W. Andrews — PETITIONER
(Your Name)

VS.

Dave Yost, Attorney General of Ohio — RESPONDENT(S)

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

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

Please check the appropriate boxes:

☒ Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

Ohio Supreme Court

☐ Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

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

☐ Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

☐ The appointment was made under the following provision of law: _____, or

☐ a copy of the order of appointment is appended.

*Michael W. Andrews*
(Signature)

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

I, Michael W. Andrews, 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 | $ | $ 0 | $ |
| Self-employment | $ 0 | $ | $ 0 | $ |
| Income from real property (such as rental income) | $ 0 | $ | $ 0 | $ |
| Interest and dividends | $ 0 | $ | $ 0 | $ |
| Gifts | $ 0 | $ | $ 0 | $ |
| Alimony | $ 0 | $ | $ 0 | $ |
| Child Support | $ 0 | $ | $ 0 | $ |
| Retirement (such as social security, pensions, annuities, insurance) | $ 0 | $ | $ 0 | $ |
| Disability (such as social security, insurance payments) | $ 0 | $ | $ 0 | $ |
| Unemployment payments | $ 0 | $ | $ 0 | $ |
| Public-assistance (such as welfare) | $ 0 | $ | $ 0 | $ |
| Other (specify): | $ | $ | $ | $ |
| **Total monthly income:** | $ 0 | $ | $ 0 | $ |

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 |
|---|---|---|---|
| Peanut Trucking and | | 10/2025-11/2025 | $ 300 |
| | | | $ |
| Priority Dispatch | | 1/2024-2/2025 | $ 1200 |

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 *I am not married | N/A | N/A | $ |
| | | | $ N/A |
| | | | $ |

4. How much cash do you and your spouse have? $ 0
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 |
|---|---|---|
| Checking | $ 0 | $ |
| | $ | $ |
| | $ | $ |

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

☐ Home
Value N/A

☐ Other real estate
Value

☑ Motor Vehicle #1
Year, make & model 2010 Toyota Scion
Value $1200

☐ Motor Vehicle #2
Year, make & model
Value

☐ 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. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

| Name | Relationship | Age |
|---|---|---|
| I . A | Daughter | 5 Months |
| X M | Son | 9 years |
| N M | Daughter | 16 Years |

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)<br>Are real estate taxes included? ☐ Yes ☐ No<br>Is property insurance included? ☐ Yes ☐ No | $ 0 | $ N/A |
| Utilities (electricity, heating fuel, water, sewer, and telephone) | $ 0 | $ |
| Home maintenance (repairs and upkeep) | $ 0 | $ |
| Food | $ 0 | $ |
| Clothing | $ 0 | $ |
| Laundry and dry-cleaning | $ 0 | $ |
| Medical and dental expenses | $ 0 | $ |

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

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 am currently incarcerated and unable to pay the costs of this case.

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

Executed on: March 7, 2026

Michael W. Andrews
(Signature)

IN THE SUPREME COURT OF OHIO 25-1161

Affidavit of Indigence

I, Michael Andrews, do hereby state that I am without the necessary funds to pay the costs of this action for the following reason(s)*:

Lack of employment due to mental health c

*If you require additional space for your statement of reasons, you may continue on the back side of this form.*

Pursuant to Rule 3.06, of the Rules of Practice of the Supreme Court of Ohio, and for the reasons stated above, I am requesting that the filing fee and security deposit, if applicable, be waived.

Michael Andrews
Affiant

Sworn to, or affirmed, and subscribed in my presence this 8th day of September, 2025.**

Kathy Battle
Notary Public

Kathy Battle
Notary Public, State of Ohio
Commission #: 2018-RE-711134
My Commission Expires 03-14-2028

My Commission Expires: 3/14/2028.

*** S.Ct.Prac.R. 3.06 requires your affidavit of indigence to state the reason(s) you are unable to pay the docket fees and/or security deposit. Failure to state specific reasons that you are unable to pay will result in your affidavit being rejected for filing by the clerk.**
****This affidavit must be executed not more than six months prior to being filed in the Supreme Court in order to comply with S.Ct.Prac.R. 3.06. Affidavits not in compliance with that section will be rejected for filing by the clerk.**

FILED
SEP 08 2025
CLERK OF COURT
SUPREME COURT OF OHIO