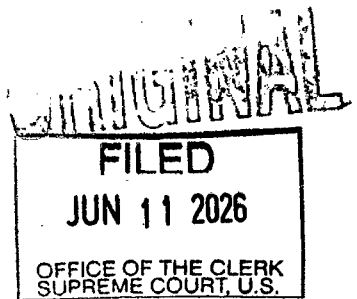


23-5163
No. _____



IN THE
SUPREME COURT OF THE UNITED STATES

DARDAGAN, Suvad, — PETITIONER
(Your Name)

VS.

MAHER, Justin, Warden, — 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):

1) Feb. 15, 2024, Dardagan v. Greene, 24CH944, Cook Cnty.Cir, Ct.; 2) Jan.10, 2025, Dardagan v.Greene, 2025 IL App (1st) 1-25-0047; Jan. 14, 2026, Dardagan v. Greene, 2026 IL 132684 (Supreme Court of Illinois).

☐ 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.

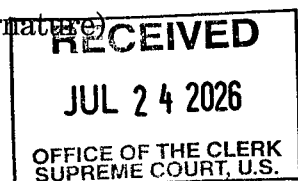
☐ Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

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

☐ a copy of the order of appointment is appended.

A handwritten signature in black ink, appearing to be "Dardagan", written over a horizontal line.

(Signature)



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

I, Suvad Dardagan, 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	\$	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$
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:	\$ 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
Incarcerated since 1999			\$
			\$
			\$

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
Divorced			\$
			\$
			\$

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 <u>TV, and small electric/electronic items</u> Value <u>\$ 200.00</u>	

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
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	\$ _____
Are real estate taxes included? ☐ Yes ☐ No		
Is property insurance included? ☐ Yes ☐ No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 0.00	\$ _____
Home maintenance (repairs and upkeep)	\$ 0.00	\$ _____
Food	\$ 50.00	\$ _____
Clothing	\$ 20.00	\$ _____
Laundry and dry-cleaning	\$ 5.00	\$ _____
Medical and dental expenses	\$ 0.00	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0.00	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0.00	\$
Life	\$ 0.00	\$
Health	\$ 0.00	\$
Motor Vehicle	\$ 0.00	\$
Other: _____	\$	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0.00	\$
Installment payments		
Motor Vehicle	\$ 0.00	\$
Credit card(s)	\$ 0.00	\$
Department store(s)	\$ 0.00	\$
Other: _____	\$	\$
Alimony, maintenance, and support paid to others	\$ 0.00	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$
Other (specify): _____	\$	\$
Total monthly expenses:	\$ 75-100.00	\$

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? _____

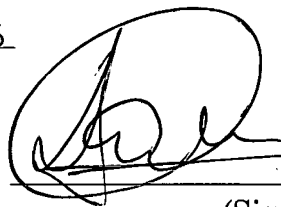
If yes, state the person's name, address, and telephone number:

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

I am incarcerated and have no income.

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

Executed on: June 10, 2026



(Signature)

Date: 5/22/2026

Time: 8:37am

Western Illinois Correctional Center

Page 1

Trust Fund

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Inmate Transaction Statement

REPORT CRITERIA - Date: 11/21/2025 thru End; Inmate: R20682; Active Status Only ? : No; Print Restrictions ? : Yes;
 Transaction Type: All Transaction Types; Print Furloughs / Restitutions ? : Yes; Include Inmate Totals ? : Yes; Print Balance
 Errors Only ? : No; Statewide ? : Yes

Inmate: R20682 Dardagan, Suvad

Housing Unit: WIL-02-B -36

Inst	Date	Source	Transaction Type	Batch	Reference #	Description	Amount	Balance
							Beginning Balance:	23.20
WIL	11/25/25	Mail Room	15 JPAY	329200	185688379	Wruble, Scott	100.00	123.20
WIL	12/03/25	Mail Room	15 JPAY	337200	185926550	Haskovic, Senad	150.00	273.20
WIL	12/05/25	Disbursements	81 Legal Postage	3393192	Chk #178201	071460, Reserve Acco, Inv. Date: 11/26/2025	-3.56	269.64
WIL	12/05/25	Disbursements	81 Legal Postage	3393192	Chk #178201	071460, Reserve Acco, Inv. Date: 11/26/2025	-3.56	266.08
WIL	12/05/25	Disbursements	80 Postage	3393192	Chk #178201	071459, Reserve Acco, Inv. Date: 11/26/2025	-3.56	262.52
WIL	12/05/25	Payroll	20 Payroll Adjustment	3391192		P/R month of 112025	15.60	278.12
WIL	12/08/25	Point of Sale	60 Commissary	3427168	1189691	Commissary	-227.26	50.86
WIL	12/15/25	Disbursements	84 Library	3493213	Chk #178291	71630, DOC: 523 Fund, Inv. Date: 12/09/2025	-27.60	23.26
WIL	12/15/25	Disbursements	83 Copies	3493213	Chk #178304	071701, DOC: 523 Fun, Inv. Date: 12/12/2025	-.40	22.86
WIL	12/19/25	Disbursements	84 Library	3533213	Chk #178405	71704, DOC: 523 Fund, Inv. Date: 12/15/2025	-1.80	21.06
WIL	12/19/25	Disbursements	84 Library	3533213	Chk #178405	071820, DOC: 523 Fun, Inv. Date: 12/18/2025	-5.00	16.06
WIL	12/19/25	Disbursements	80 Postage	3533213	Chk #178413	71703, Reserve Accou, Inv. Date: 12/15/2025	-3.56	12.50
WIL	12/26/25	Mail Room	15 JPAY	360200	186651682	Ference, Labernadet	50.00	62.50
WIL	12/31/25	Disbursements	84 Library	3653213	Chk #178580	071833, DOC: 523 Fun, Inv. Date: 12/19/2025	-3.80	58.70
WIL	01/04/26	Mail Room	10 Western Union	004200	3268833387	Venable, Stacy R	150.00	208.70
WIL	01/05/26	Mail Room	15 JPAY	005200	186928333	Haskovic, Senad	100.00	308.70
WIL	01/07/26	Point of Sale	60 Commissary	0077242	1191336	Commissary	-222.00	86.70
WIL	01/07/26	Payroll	20 Payroll Adjustment	0071192		P/R month of 122025	15.60	102.30
WIL	01/09/26	Disbursements	84 Library	0093213	Chk #178734	072086, DOC: 523 Fun, Inv. Date: 01/06/2026	-.30	102.00
WIL	01/09/26	Disbursements	83 Copies	0093213	Chk #178747	072087, DOC: 523 Fun, Inv. Date: 01/06/2026	-.60	101.40
WIL	01/23/26	Disbursements	84 Library	0233213	Chk #178942	072361, DOC: 523 Fun, Inv. Date: 01/22/2026	-36.90	64.50
WIL	01/30/26	Disbursements	84 Library	0303213	Chk #179080	072485, DOC: 523 Fun, Inv. Date: 01/28/2026	-6.30	58.20
WIL	01/30/26	Disbursements	81 Legal Postage	0303213	Chk #179088	072461, Reserve Acco, Inv. Date: 01/28/2026	-11.30	46.90
WIL	01/30/26	Disbursements	81 Legal Postage	0303213	Chk #179088	072461, Reserve Acco, Inv. Date: 01/28/2026	-11.30	35.60
WIL	02/05/26	Payroll	20 Payroll Adjustment	0361192		P/R month of 1 2026	15.60	51.20
WIL	02/07/26	Mail Room	15 JPAY	038200	187896385	Haskovic, Senad	260.00	311.20
WIL	02/10/26	Point of Sale	60 Commissary	0417226	1193029	Commissary	-212.78	98.42
WIL	02/11/26	Disbursements	84 Library	0423192	Chk #179236	072623, DOC: 523 Fun, Inv. Date: 02/05/2026	-.40	98.02
WIL	03/05/26	Payroll	20 Payroll Adjustment	0641192		P/R month of 2 2026	14.56	112.58
WIL	03/10/26	Mail Room	15 JPAY	069200	188926774	Haskovic, Senad	150.00	262.58
WIL	03/10/26	Point of Sale	60 Commissary	0697223	1194690	Commissary	-200.81	61.77
WIL	03/13/26	Disbursements	84 Library	0723213	Chk #179716	073112, DOC: 523 Fun, Inv. Date: 03/11/2026	-3.60	58.17
WIL	03/13/26	Disbursements	81 Legal Postage	0723213	Chk #179729	073076, Reserve Acco, Inv. Date: 03/10/2026	-2.17	56.00
WIL	03/13/26	Disbursements	81 Legal Postage	0723213	Chk #179729	073076, Reserve Acco, Inv. Date: 03/10/2026	-11.30	44.70

Date: 5/22/2026

Time: 8:37am

Western Illinois Correctional Center

Page 2

Trust Fund

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Inmate Transaction Statement

REPORT CRITERIA - Date: 11/21/2025 thru End; Inmate: R20682; Active Status Only ? : No; Print Restrictions ? : Yes;
 Transaction Type: All Transaction Types; Print Furloughs / Restitutions ? : Yes; Include Inmate Totals ? : Yes; Print Balance
 Errors Only ? : No; Statewide ? : Yes

Inmate: R20682 Dardagan, Suvad

Housing Unit: WIL-02-B -36

Inst	Date	Source	Transaction Type	Batch	Reference #	Description	Amount	Balance
WIL	04/06/26	Payroll	20 Payroll Adjustment	0961192		P/R month of 3 2026	15.60	60.30
WIL	04/07/26	Mail Room	15 JPAY	097200	189770352	Haskovic, Senad	200.00	260.30
WIL	04/08/26	Point of Sale	60 Commissary	0987242	1196226	Commissary	-218.50	41.80
WIL	04/08/26	Point of Sale	60 Commissary	0987242	1196227	Commissary	-2.20	39.60
WIL	04/10/26	Disbursements	84 Library	1003213	Chk #180187	073511, DOC: 523 Fun, Inv. Date: 04/03/2026	-8.00	31.60
WIL	04/10/26	Disbursements	81 Legal Postage	1003213	Chk #180203	073508, Reserve Acco, Inv. Date: 04/03/2026	-2.72	28.88
WIL	04/10/26	Disbursements	81 Legal Postage	1003213	Chk #180203	073508, Reserve Acco, Inv. Date: 04/03/2026	-2.72	26.16
WIL	05/06/26	Payroll	20 Payroll Adjustment	1261192		P/R month of 4 2026	14.08	40.24
WIL	05/07/26	Mail Room	15 JPAY	127200	190695076	Haskovic, Senad	100.00	140.24
WIL	05/11/26	Point of Sale	60 Commissary	1317228	1197837	Commissary	-110.17	30.07

Total Inmate Funds: 30.07

Less Funds Held For Orders: .00

Less Funds Restricted: .00

Funds Available: 30.07

Total Furloughs: .00

Total Voluntary Restitutions: .00

5.22.2026

100.00+
 15.00+
 15.60+
 50.00+
 150.00+
 100.00+
 15.60+
 15.60+
 260.00+
 14.56+
 150.00+
 15.60+
 200.00+
 14.08+
 100.00+
 1,216.04*
 1,216.04+I
 15.=
 81.07*

915

I declare under penalty of perjury that the above information is true and correct. I understand that 28 U.S.C. § 1915(e)(2)(A) states that the court shall dismiss this case at any time if the court determines that my allegation of poverty is untrue.

Date: May 21, 2026


Signature of Applicant

Suvad Dardagan, Reg No.: R20682
(Print Name)

NOTICE TO PRISONERS: In addition to the Certificate below, a prisoner must also attach a print-out from the institution(s) where he or she has been in custody during the last six months showing all receipts, expenditures and balances in the prisoner's prison or jail trust fund accounts during that period. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account - prepared by each institution where you have been in custody during that six-month period. As already stated, you must also have the Certificate below completed by an authorized officer at each institution.

CERTIFICATE

(Incarcerated applicants only)

(To be completed by the institution of incarceration)

I certify that the applicant named herein Suvad Dardagan, I.D.# R 20682 has the sum of \$ 30.77 on account to his/her credit at (name of institution) WICC. I further certify that the applicant has the following securities to his/her credit: N/A. I further certify that during the past six months the applicant's average monthly deposit was \$ 81.07. (Add all deposits from all sources and then divide by number of months).

5/22/2026

Date



Signature of Authorized Officer

Misty Thompson
(Print Name)