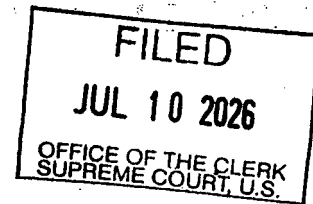


No. **26-5254**



IN THE
SUPREME COURT OF THE UNITED STATES

INTCWAYNER VANCE SENIOR — PETITIONER
(Your Name)

VS.

**THE STATE OF NEW YORK
DOCS, ET AL** — RESPONDENT(S)

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:

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

**THE U.S. DISTRICT COURTS FOR THE NORTHERN AND
WESTERN DISTRICT OF NEW YORK**

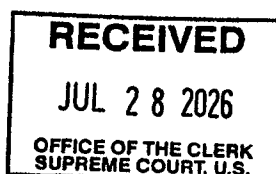
☐ Petitioner has not previously been granted leave to proceed *in forma pauperis* in any other court.

☒ 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.



Way P. Vance
(Signature)

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

I, WAYNE P. VANCE SR., 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>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Self-employment	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Gifts	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Alimony	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Child Support	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Other (specify): <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>	\$ <u>NONE</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</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.) **I HAVE BEEN UNEMPLOYED FOR THE PAST TWO YEARS OR SO.**

Employer	Address	Dates of Employment	Gross monthly pay
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>

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.) **I DO NOT HAVE A SPOUSE.**

Employer	Address	Dates of Employment	Gross monthly pay
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>

4. How much cash do you and your spouse have? **I DO NOT HAVE ANY CASH OR MONEY IN A \$ ACCOUNT AND I DO NOT HAVE A SPOUSE.**
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
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

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

☐ Home
Value N/A

☐ Other real estate
Value N/A

☐ Motor Vehicle #1
Year, make & model N/A
Value N/A

☐ Motor Vehicle #2
Year, make & model N/A
Value N/A

☐ Other assets
Description N/A
Value N/A

I DO NOT HAVE ANYTHING OF GREAT VALUE SUCH AS A PERSONAL OWNED BUSINESS, HOME, AUTOMOBILE, AIRCRAFT, BOAT, LAND OR OTHER REAL ESTATE OR ASSETS. PLUS, I DO NOT RECEIVE ANY FUNDS FROM A BUSINESS, RENT PAYMENTS, CHILD SUPPORT, PENSION, INSURANCE POLICY, INHERITANCE, SSI, SSD, DISABILITY, VETERAN BENEFITS OR ANY OTHER PAYMENTS SO I'M UNABLE TO OBTAIN ANY ASSETS AT THIS TIME.

6. State every person, business, or organization owing you or your spouse money, and the amount owed. **PLEASE SEE THE ATTACHED SHEET FOR THE NAMES OF DEFENDANTS-RESPONDENTS AND THE AMOUNT OWED AT THIS POINT.**

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
<u>SEE ATTACHED</u>	<u>\$ SEE ATTACHED</u>	<u>\$ N/A</u>
<u>SEE ATTACHED</u>	<u>\$ SEE ATTACHED</u>	<u>\$ N/A</u>
<u>SEE ATTACHED</u>	<u>\$ SEE ATTACHED</u>	<u>\$ N/A</u>

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
<u>W. P. V. JR.</u>	<u>MY OLDEST SON</u>	<u>17</u>
<u>W. P. V. III</u>	<u>MY YOUNGEST SON</u>	<u>14</u>
<u> </u>	<u> </u>	<u> </u>

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. **I AM A STATE PRISONER WHO DO NOT HAVE ANY OF THE EXPENSES STATED BELOW. I DO OWE THE STATE FOR LEGAL EXPENSES AND THE MONTHLY AVERAGE IS STATED BELOW OR IN THIS SECTION.**

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	<u>\$ N/A</u>	<u>\$ N/A</u>
Are real estate taxes included? ☐ Yes ☐ No		
Is property insurance included? ☐ Yes ☐ No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	<u>\$ N/A</u>	<u>\$ N/A</u>
Home maintenance (repairs and upkeep)	<u>\$ N/A</u>	<u>\$ N/A</u>
Food	<u>\$ N/A</u>	<u>\$ N/A</u>
Clothing	<u>\$ N/A</u>	<u>\$ N/A</u>
Laundry and dry-cleaning	<u>\$ N/A</u>	<u>\$ N/A</u>
Medical and dental expenses	<u>\$ N/A</u>	<u>\$ N/A</u>

	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>	\$ <u>N/A</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>N/A</u>	\$ <u>N/A</u>	\$ <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>APPROVED ADVANCES</u> <u>FOR LEGAL EXPENSES</u>	\$ <u>30</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>30</u>	\$ <u>N/A</u>

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.

PLEASE SEE THE ATTACHED SHEETS

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 I WILL BE PAYING AN ATTORNEY MONEY IN CONNECTION WITH THIS CASE AFTER I'M RELEASED FROM THIS UNLAWFUL IMPRISONMENT AND GRANTED THE ENTITLED RELIEF IN THIS CASE. If yes, how much? THE ATTORNEY WILL BE PAID ON A SET SALARY IN A AMOUNT SPECIFIED BY LAW.

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

I AM UNABLE TO PROVIDE THIS COURT WITH THE NAME, ADDRESS AND TELEPHONE NUMBER OF THE ATTORNEY BECAUSE I HAVE NOT SAT DOWN WITH ANY ATTORNEY YET TO SEE WHO IS RIGHT FOR THE JOB. I AM PLANNING ON WORKING WITH THE DEPARTMENT OF LABOR AND OTHER GOVERNMENT AGENCIES TO APPOINT QUALIFIED ATTORNEYS FOR SERVICES IN CONNECTION WITH THIS CASE.

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, I WILL BE PAYING A PARALEGAL OR A TYPIST MONEY FOR SERVICES IN CONNECTION WITH THIS CASE AFTER I'M GRANTED THE ENTITLED RELIEF IN THIS CASE. ☒ Yes ☐ No

If yes, how much? THE PARALEGAL OR TYPIST WILL BE PAID ON A SET SALARY IN A AMOUNT SPECIFIED BY LAW.

If yes, state the person's name, address, and telephone number: I AM UNABLE TO PROVIDE THIS COURT WITH THE NAME, ADDRESS AND TELEPHONE NUMBER OF THE PARALEGAL OR TYPIST BECAUSE I HAVE NOT SAT DOWN WITH ANY PARALEGAL OR TYPIST YET TO SEE WHO IS RIGHT FOR THE JOB. I AM PLANNING ON WORKING WITH THE DEPARTMENT OF LABOR AND OTHER GOVERNMENT AGENCIES TO APPOINT QUALIFIED PARALEGALS OR TYPISTS FOR SERVICES IN CONNECTION WITH THIS CASE.

12. Provide any other information that will help explain why you cannot pay the costs of this case. I DO NOT HAVE ANY MEANS OF SUPPORTING MYSELF OR OTHERS BECAUSE OF MY POOR PERSON STATUS. THE STATE IS TAKING MY IDLE PAY AND FUNDS FROM HOME BECAUSE I OWE MONEY FOR SURCHARGES, PHOTOCOPIES, MAILOUTS AND OTHER FEES. I AM ALSO UNDER AN OUTSTANDING PAST DUE CHILD SUPPORT BALANCE OF \$500 IN CHILD SUPPORT CASE # BQ93593597P2. AT THIS POINT, I ASK THAT THIS COURT PLEASE PROVIDE FOR ME TO OBTAIN A COURT APPOINTED ATTORNEY FOR FULL SCOPE REPRESENTATION; PROVIDE FOR ME TO OBTAIN FREE CERTIFIED COPIES OF TRANSCRIPTS AND OTHER DOCUMENTS; PROVIDE FOR MY CASE RECORDS TO BE TRANSFERRED TO THIS COURT BY THE COURT'S BELOW; DISPENSE WITH THE REQUIREMENT OF A JOINT APPENDIX IN THIS CASE; PROVIDE FOR THE SERVICES OF SPECIAL INVESTIGATORS, U.S. MARSHALS TO SERVE PAPERS AND OTHER PROFESSIONALS; AND PROVIDE FOR ANY OTHER WELFARE ASSISTANCE AND RELIEF NEEDED IN THIS CASE. I declare under penalty of perjury that the foregoing is true and correct. [SEE EXHIBITS E, 160 AND 180]

Executed on: JULY 10, 2026

W. P. V.
(Signature)

THE PETITIONER'S ANSWER FOR QUESTION #6

WAYNE P. VANCE SENIOR

THE FOLLOWING DEFENDANTS-RESPONDENTS OWE ME AND MY FAMILY MEMBERS, FRIENDS, RELATIVES AND OTHER PEOPLE A GREAT AMOUNT OF MONEY FOR OUR GREAT SERVICES, EFFORTS, ACHIEVEMENTS AND DAMAGES SO THEY ARE CURRENTLY BEING SUED IN THEIR INDIVIDUAL AND OFFICIAL CAPACITY FOR COMPENSATORY AND PUNITIVE DAMAGES IN THE SUM OF ONE TRILLION DOLLAR AND FOR THE INJUNCTIVE RELIEF DEMANDED IN MY PETITION FOR A WRIT OF CERTIORARI AND OTHER RELIEF, PETITION FOR REHEARING OF THE ORDER DENYING CERTIORARI, PETITION FOR A WRIT(S) OF MANDAMUS AND/OR PROHIBITION, PETITION FOR A WRIT OF **MANDAMUS**, BRIEF(S), SUPPLEMENTAL COMPLAINT, AND MOTION PAPERS FOR A SUMMARY JUDGMENT AND TO ADDRESS ALL ISSUES INVOLVED IN THIS CASE: THE U.S GOVERNMENT, THE AGENCY OR AGENCIES OF THE GOVERNMENT'S CYBER PUNK EMPLOYEES, THE U.S DISTRICT COURTS FOR THE NORTHERN AND WESTERN DISTRICT OF NEW YORK, THE DEPARTMENT OF JUSTICE, THE U.S ATTORNEY OFFICE IN SYRACUSE OF NEW YORK, THE NYS GOVERNOR OFFICE, NYS ERIE COUNTY BUFFALO CITY HALL, NYS COURT OF APPEALS, NYS APPELLATE DIVISION 3RD AND 4TH DEPARTMENT, NYS ERIE COUNTY SUPREME COURT, NYS ERIE COUNTY BUFFALO CITY COURT, NYS ERIE COUNTY CHEEKTOWAGA TOWN COURT, NYS ALBANY COUNTY SUPREME COURT, NYS ERIE COUNTY PROBATION DEPARTMENT, NYS ERIE COUNTY TONAWANDA TOWN COURT, NYS ERIE COUNTY BUFFALO FAMILY COURT, NYS ATTORNEY GENERAL OFFICE, NYS ERIE COUNTY BUFFALO POLICE DEPARTMENT, NYS ERIE COUNTY JAIL, NYS ERIE COUNTY HOLDING CENTER, NAACP, CRISIS SERVICES, THE SAFE HARBORS OF THE FINGER LAKES, PRISONERS' LEGAL SERVICES OF NEW YORK, THE LEGAL AID SOCIETY OR PRISONERS' RIGHTS PROJECT, LETITIA JAMES, ERIC PINN SONNAULT, JONATHAN REINER, SHANNAN C. KRASNOKUTSKI, DAVID G. LARIMER, BRENDA K. SANNES, MAE A. D'AGOSTINO, ANDREW T. BAXTER, ROWAN D. WILSON, GERALD J. WHALEN, FRANCIS E. CAFARELL, GERALD W. CONNOLLY, MICHAEL J. PIETRUSZKA, LYNN CYBULSKI, CHRISTOPHER L. JACOBS, FRANK A. SEDITA III, MICHAEL FLAHERTY, AMY J. GOLDSTEIN, JAMES F. BARGNESI, ASHLEY R. LOWRY, ANTHONY J. ANNUCCI, KAREN BELLAMY, A. RODRIGUEZ, DONALD UHLER, MICHAEL KIRKPATRICK, GEORGE POFF, MR. BULLIS, MRS. HENLEY, MRS. LIBERTY, RICHARD ADAMS, MANDALAYWALA MD VIJAY KUMAN, DRAGOS MACELARU, CATHERINE CALLEY, G. WATERSON, B. CHRISTIAN, GLEN ENGSTROM, AMBROSE WALDRON, CHAD ROWE, TRAVIS BAXTER, J. RIEF, S. BARCOMB, J. RUSSELL, S. BECK, SGT T. WILSON, M. FREW, M. WETZLER, K. WARNER, EILEEN McDONOUGH, JODI HIBBARD, HANNAH F. CAVANAUGH, ABIGAIL HALLOWELL, ALEXANDER JONES, DONALD VENETTOZZI, MR. WEISHAUP, GLEN T. SUDDABLY, J. LOHIER JUNIOR, MICHAEL H. PARK, WILLIAM J. NARDINI, CATHERINE

O'HAGAN WOLFE, JUDGE SMITH, JUDGE P.J., JUDGE CENTRA, JUDGE CARNI, JUDGE PERADOTTO, MARY C. LOEWENGUTH, N. EALLONARDO, JOHN M. DOMURAD, DEBRA ANN LIVINGSTON, LAWRENCE K. BAERMAN, JEFFREY LANG, ELIZABETH GENUNG, GEORGE LOWE, FREDERICK A. BRODIE, BARBARA D. UNDERWOOD, E. CAREY CANTWELL, U.S POSTAL SERVICE, NYS ERIE COUNTY MEDICAL CENTER, NYS ERIE COUNTY BUFFALO BOARD OF EDUCATION, THE UNIVERSITY OF BUFFALO ORTHOPEDIC CLINIC, NYS CIVIL LIBERTIES UNION, THE BAR ASSOCIATION, DARIUS PRIDGET, ROBERT D. MAYBERGER, JUDGE PETERS, JUDGE P.J., JUDGE LYNCH, JUDGE ROSE, JUDGE MULVEY JJ, JUDGE AERONS, JUDGE PRITZKER JJ, C. COX, J. RUFA, MR. BOGARDUS, MR. ARCHAMBEAULT, K. DREW, MR. BAXTER, ATTICA PACKAGE ROOM OFFICERS, NYS DOCCS OFFICERS ASSIGNED TO THE BLOCKS THAT I WAS HOUSED IN AT EACH FACILITY, THE STATE OF NEW YORK DOCCS AND OTHER AGENCIES, PERSONS OR ENTITIES WHO ARE UNKNOWN PARTICIPANTS WHO HAVE BEEN PARTICIPATING IN THE DANGEROUS, VICIOUS, IMMORAL AND OPPRESSIVE ACTIVITIES UNDERLYING THE CLAIMS SET FORTH IN THIS CASE.

THE PETITIONER'S ANSWER FOR QUESTION #9

I EXPECT MAJOR CHANGES TO MY MONTHLY INCOME, EXPENSES, ASSETS, AND LIABILITIES DURING THE NEXT 12 MONTHS BECAUSE I BELIEVE THAT THIS COURT WILL EXERCISE ITS SUPERVISORY POWERS, GRANT MY PETITIONS AND PROVIDE FOR THE ENTITLED RELIEF DEMANDED IN THIS CASE.

RESPECTFULLY SUBMITTED,

W P. V

WAYNE P. VANCE SENIOR
ATTICA CORRECTIONAL FACILITY
P.O BOX 149
639 EXCHANGE STREET
ATTICA, NEW YORK 14011

SWORN TO BEFORE ME ON THE 13th DAY

OF July 2026

[Signature]
NOTARY PUBLIC

8 OF 8

ANTHONY J EHRENREICH
Notary Public, State of New York
Registration # 01EH0016932
Qualified in Erie County
Commission Expires 11/27/27