No. 26-5999

FILED
APR 07 2026
OFFICE OF THE CLERK
SUPREME COURT, U.S.

IN THE

SUPREME COURT OF THE UNITED STATES

William Hudson, pro se — PETITIONER

vs.

State of Delaware — 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): Delaware Superior and Supreme Court, Delaware District Court, 3rd Circuit Court of Appeals, United States 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.

Will P. Hudson
(Signature)

No. _____

IN THE SUPREME COURT OF THE UNITED STATES

William Hudson, pro se — PETITIONER

vs.

State of Delaware — RESPONDENT(S)

AFFIDAVIT TO ACCOMPANYING MOTION FOR PERMISSION TO PROCEED IN FORMA PAUPERIS

Affidavit in Support of Motion

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0", "none", or "not applicable (N/A)", write that response. If you need more space to answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed: William R. Hudson Date: June 8, 2026

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

I, William Hudson, 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**	
	Self	Spouse	Self	Spouse
Employment	$225	$0	$225	$0
Self-employment	$0	$0	$0	$0
Income from real property (such as rental income)	$0	$0	$0	$0
Interest and dividends	$3	$0	$3	$0
Gifts	$0	$0	$0	$0
Alimony	$0	$0	$0	$0
Child Support	$0	$0	$0	$0
Retirement (such as social security, pensions, annuities,	$0	$0	$0	$0

insurance)				
Disability (such as social security, insurance payments)	$0	$0	$0	$0
Unemployment payments	$0	$0	$0	$0
Public assistance (such as welfare)	$0	$0	$0	$0
Other (specify):	$0	$0	$0	$0
Total monthly income:	$228	$0	$228	$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**
State of Delaware	1181 Paddock Rd. Smyrna, DE 19977	current	$225 $ $

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
   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**
Ally Banl checking	$5	$N/A
Ally Bank savings	$1442	$N/A
Stepping Stones savings	$5	$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

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		

6. 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		

7. 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) Are real estate taxes included? ☐ Yes ☐ No Is property insurance included? ☐ Yes ☐ No	$0	$N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	$0	$N/A
Home maintenance (repairs and upkeep)	$0	$N/A
Food	$150	$N/A
Clothing	$50	$N/A
Laundry and dry-cleaning	$0	$N/A
Medical and dental expenses	$0	$N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	$0	$N/A
Recreation, entertainment, newspapers, magazines, etc.	$10	$N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowners or renter's	$0	$N/A
Life	$0	$N/A
Health	$0	$N/A
Motor Vehicle	$0	$N/A
Other:	$0	$N/A
Taxes (not deducted from wages or included in mortgage payments) (specify):	$0	$N/A
Installment payments		
Motor Vehicle	$0	$N/A
Credit card(s)	$0	$N/A
Department store(s)	$0	$N/A
Other:	$0	$N/A
Alimony, maintenance, and support paid to others	$0	$N/A
Regular expenses for operation of business, profession, or farm (attached detailed statement)	$0	$N/A
Other (specify):	$0	$N/A
Total monthly expenses:	$210	$N/A

8. 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.

9. 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:

10. 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:

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

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

Executed on: June 8, 2026

Willa D. Hudson

(Signature)

JAMES T VAUGHN CORRECTIONAL CENTER
SUPPORT SERVICES OFFICE
MEMORANDUM

TO: Hudson William SBI :00688958

FROM: JTVCC Support Services/Business Office- Inmate Accounts

RE: **6 month / Average Daily Balance Statement**

DATE: March 31, 2026

Attached are copies of your inmate account statements for the months of

September 2025 to March 2026.

Average daily balance/ 6 months: $238.03

Department of Correction Certified Statement

~~I hereby certify that the appellant named herein has the sum of $107.41~~ on account to the appellant's credit at the institution where the appellant is confined. I further certify that the appellant has the following securities to the appellant's credit according to the institution's records: N/A.

Dalton Harley 3/31/26
Designee/Date

Louise V 3/31/26
Notary/Date

LOUISE MARGARET KINSEY
NOTARY PUBLIC
STATE OF DELAWARE
My Commission Expires Upon Office

Attachments
Cc: File

Run Date: 03/31/2026 12:16 PM

Delaware Department of Correction

Inmate Account Statement

Location: JTVCC
Period From: 09/30/2025 **To** 03/31/2026

Account # : 00688958 **Name:** HUDSON WILLIAM **Current Location / Housing:** JTVCC / Bldg S1 Tier F

As of 09/30/2025 Opening Balance: $250.75 **As of 09/30/2025 Opening Available Balance*:** $250.75

Trans Number	Trans Date	Trans Type	Source Money Order	Debit	Credit	Hold Available Balance	Balance	Memo / Comment
4441868	10/02/2025	Keefe Store Purchase	213165	$27.27		$0.00	$223.48	Commissary Order 142107,STATE OF DELAWARE
4442290	10/02/2025	Keefe Store Purchase	213165	$16.27		$0.00	$207.21	Commissary Order 141513,STATE OF DELAWARE
4442871	10/02/2025	Keefe Store Purchase	213165	$10.00		$0.00	$197.21	Commissary Order 146206,STATE OF DELAWARE
4444251	10/03/2025	Mail Money Order	V#08517329		$4.00	$0.00	$201.21	PHOTO REFUND
4444995	10/03/2025	Keefe Store Purchase			$3.72	$0.00	$204.93	Commissary Refund 78050,STATE OF DELAWARE
4446638	10/06/2025	Pay-To	213126	$100.00		$0.00	$104.93	ALLY BANK
4449583	10/08/2025	Wages-Correction Industries			$268.54	$0.00	$373.47	
4451526	10/09/2025	Keefe Store Purchase	213284	$45.54		$0.00	$327.93	Commissary Order 147731,STATE OF DELAWARE
4459386	10/16/2025	Keefe Store Purchase	213353	$8.82		$0.00	$319.11	Commissary Order 154970,STATE OF DELAWARE
4461874	10/17/2025	Keefe Store Purchase			$3.49	$0.00	$322.60	Commissary Refund 85647,STATE OF DELAWARE
4466957	10/23/2025	Keefe Store Purchase	213450	$45.23		$0.00	$277.37	Commissary Order 160232,STATE OF DELAWARE
4473384	10/29/2025	GTL Tablets	213455	$20.00		$0.00	$257.37	GTL
4474407	10/30/2025	Keefe Store Purchase	213511	$35.97		$0.00	$221.40	Commissary Order 168145,STATE OF DELAWARE
4475240	10/30/2025	Keefe Store Purchase	213511	$5.00		$0.00	$216.40	Commissary Order 171396,STATE OF DELAWARE
4482345	11/06/2025	Keefe Store Purchase	213619	$28.72		$0.00	$187.68	Commissary Order 173909,STATE OF DELAWARE
4483634	11/06/2025	Wages-Correction Industries			$252.45	$0.00	$440.13	
4490524	11/13/2025	Keefe Store Purchase	213750	$40.17		$0.00	$399.96	Commissary Order 180535,STATE OF DELAWARE
4491517	11/13/2025	Keefe Store Purchase	213750	$10.00		$0.00	$389.96	Commissary Order 184495,STATE OF DELAWARE
4492049	11/13/2025	Postage	213689	$10.45		$0.00	$379.51	11/9/25,STATE OF DELAWARE
4492860	11/14/2025	Pay-To	213695	$100.00		$0.00	$279.51	ALLY BANK
4496569	11/18/2025	IEC - Boys & Girls Clubs of DE	214275	$21.00		$0.00	$258.51	KRISPY KREME,STATE OF DELAWARE
4498442	11/20/2025	Keefe Store Purchase	213790	$48.86		$0.00	$209.65	Commissary Order 185935,STATE OF DELAWARE
4503973	11/25/2025	Keefe Store Purchase	213902	$15.99		$0.00	$193.66	Commissary Order 192653,STATE OF DELAWARE
4505535	11/26/2025	Keefe Store Purchase			$3.20	$0.00	$196.86	Commissary Refund 105491,STATE OF DELAWARE
4508570	12/01/2025	Pay-To	213859	$30.00		$0.00	$166.86	WINDISCH SARAH

* Available balance may not match with Current balance if there are outstanding transactions that have not been posted.

Run Date: 03/31/2026 12:16 PM

Delaware Department of Correction

Inmate Account Statement

Location: JTVCC

Period From: 09/30/2025 **To** 03/31/2026

Account # : 00688958

Transaction#	Transaction Date	Transaction Description	Check# / Money Order#	Debit	Credit	Hold Amount	Available Balance	Memo, From/To
4512190	12/04/2025	Keefe Store Purchase	213997	$48.46		$0.00	$118.40	Commissary Order 196317,STATE OF DELAWARE
4519619	12/09/2025	Wages-Correction Industries			$240.49	$0.00	$358.89	
4521594	12/11/2025	Keefe Store Purchase	214135	$55.73		$0.00	$303.16	Commissary Order 204810,STATE OF DELAWARE
4524230	12/12/2025	Keefe Store Purchase			$3.49	$0.00	$306.65	Commissary Refund 113694,STATE OF DELAWARE
4528743	12/17/2025	Keefe Store Purchase	214209		$1.37	$0.00	$308.02	Commissary Refund 115544,STATE OF DELAWARE
4529571	12/18/2025	Keefe Store Purchase	214209	$59.00		$0.00	$249.02	Commissary Order 210651,STATE OF DELAWARE
4532108	12/19/2025	Keefe Store Purchase			$4.56	$0.00	$253.58	Commissary Refund 117743,STATE OF DELAWARE
4536467	12/24/2025	Keefe Store Purchase	214277	$43.52		$0.00	$210.06	Commissary Order 216657,STATE OF DELAWARE
4543498	12/31/2025	Keefe Store Purchase	214381	$10.00		$0.00	$200.06	Commissary Order 227311,STATE OF DELAWARE
4543705	12/31/2025	Keefe Store Purchase	214381	$41.41		$0.00	$158.65	Commissary Order 223422,STATE OF DELAWARE
4550531	01/07/2026	Wages-Correction Industries			$282.57	$0.00	$441.22	
4552299	01/08/2026	Keefe Store Purchase	214504	$56.79		$0.00	$384.43	Commissary Order 227512,STATE OF DELAWARE
4556866	01/12/2026	Pay-To	214473	$100.00		$0.00	$284.43	WINDISCH SARAH
4556869	01/12/2026	Pay-To	214476	$50.00		$0.00	$234.43	ALLY BANK
4559984	01/14/2026	Keefe Store Purchase	214653	$32.62		$0.00	$201.81	Commissary Order 237429,STATE OF DELAWARE
4565909	01/21/2026	GTL Tablets	214656	$20.00		$0.00	$181.81	GTL
4567280	01/22/2026	Keefe Store Purchase	214708	$22.19		$0.00	$159.62	Commissary Order 242445,STATE OF DELAWARE
4573913	01/29/2026	Keefe Store Purchase	214791	$42.84		$0.00	$116.78	Commissary Order 246261,STATE OF DELAWARE
4581435	02/05/2026	Keefe Store Purchase	214885	$20.81		$0.00	$95.97	Commissary Order 253518,STATE OF DELAWARE
4582161	02/05/2026	Keefe Store Purchase	214885	$10.00		$0.00	$85.97	Commissary Order 257902,STATE OF DELAWARE
4585361	02/09/2026	Wages-Correction Industries			$238.43	$0.00	$324.40	
4589932	02/12/2026	Keefe Store Purchase		$34.18		$0.00	$290.22	Commissary Order 261210,STATE OF DELAWARE
4590341	02/12/2026	Keefe Store Purchase	214997	$59.03		$0.00	$231.19	Commissary Order 258811,STATE OF DELAWARE
4593347	02/16/2026	Keefe Store Purchase			$34.18	$0.00	$265.37	Commissary Refund 149298,STATE OF DELAWARE
4596164	02/18/2026	GTL Tablets	215000	$20.00		$0.00	$245.37	GTL

* Available balance may not match with Current balance if there are outstanding transactions that have not been posted.

Run Date: 03/31/2026 12:16 PM

Delaware Department of Correction
Inmate Account Statement

Location: JTVCC
Period From: 09/30/2025 To 03/31/2026

Account # : 00688958

Transaction#	Transaction Date	Transaction Description	Check# / Money Order#	Debit	Credit	Hold Amount	Available Balance	Memo, From/To
4597439	02/19/2026	Keefe Store Purchase	215050	$25.75		$0.00	$219.62	Commissary Order 265621,STATE OF DELAWARE
4597716	02/19/2026	Keefe Store Purchase	215050	$34.18		$0.00	$185.44	Commissary Order 268729,STATE OF DELAWARE
4603759	02/26/2026	Keefe Store Purchase	215150	$28.62		$0.00	$156.82	Commissary Order 271164,STATE OF DELAWARE
4611425	03/05/2026	Keefe Store Purchase	215275	$3.52		$0.00	$153.30	Commissary Order 280497,STATE OF DELAWARE
4611914	03/05/2026	Keefe Store Purchase	215275	$34.35		$0.00	$118.95	Commissary Order 276573,STATE OF DELAWARE
4612333	03/05/2026	Keefe Store Purchase	215275	$10.00		$0.00	$108.95	Commissary Order 281094,STATE OF DELAWARE
4614453	03/06/2026	Wages-Correction Industries			$224.40	$0.00	$333.35	
4621510	03/12/2026	Keefe Store Purchase	215399	$44.09		$0.00	$289.26	Commissary Order 284197,STATE OF DELAWARE
4629039	03/19/2026	Keefe Store Purchase	215481	$41.85		$0.00	$247.41	Commissary Order 288267,STATE OF DELAWARE
4636090	03/26/2026	Keefe Store Purchase		$30.00		$0.00	$217.41	Commissary Order 294042,STATE OF DELAWARE
4636607	03/26/2026	Keefe Store Purchase		$10.00		$0.00	$207.41	Commissary Order 298929,STATE OF DELAWARE
4639383	03/30/2026	Pay-To	215550	$100.00		$0.00	$107.41	ALLY BANK

Total: $1708.23 $1564.89

As of 03/31/2026 Current Balance: $107.41 Available Balance*: $107.41

Total Amount on Hold As of 03/31/2026:	Facility	Medical Copay	Legal	Restitution	Indigent	Room and Board	Others	Court Fees
	JTVCC	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

* Available balance may not match with Current balance if there are outstanding transactions that have not been posted.