

UNITED STATES COURT OF APPEALS

DISTRICT OF COLUMBIA CIRCUIT

333 Constitution Avenue, NW
Washington, DC 20001-2866
Phone: 202-216-7000 | Facsimile: 202-219-8530

United States

USCA No. 23-3141

v.

Michael Greene

USDC No. 21-cr-28

MOTION FOR LEAVE TO PROCEED ON APPEAL IN FORMA PAUPERIS

I, Michael Greene, declare that I am the
☒ appellant/petitioner ☐ appellee/respondent in the above-entitled proceeding. In support of this motion to proceed on appeal without being required to prepay fees, costs or give security therefor, I state that because of my poverty I am unable to prepay the costs of said proceeding or to give security therefor. My affidavit or sworn statement is attached.

I believe I am entitled to relief. The issues that I desire to present on appeal/review are as follows: *(Provide a statement of the issues you will present to the court. Attach an additional sheet if necessary.)*

Signature Michael Green

Name of *Pro Se* Litigant _____

Address 11237 Cayahaga Drive

Indianapolis IN 86235

Submit original with a certificate of service to:

Clerk of Court
United States Court of Appeals
for the District of Columbia Circuit
E. Barrett Prettyman U.S. Courthouse, Room 5523
333 Constitution Avenue, N.W.
Washington, DC 20001

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AFFIDAVIT ACCOMPANYING MOTION FOR PERMISSION TO APPEAL 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 in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed: Michael

Date: 2/12/2024

My issues on appeal are:

Government did not meet its burden for conviction of 1752

Save

Reset Form

Print Form

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			
Self-employment	0			
	You	Spouse	You	Spouse
Income from real property (such as rental income)	0			
Interest and dividends	0			
Gifts	0			
Alimony	0			
Child support	0			
Retirement (such as social security, pensions, annuities, insurance)	0			
Disability (such as social security, insurance payments)	0			
Unemployment payments	0			
Public-assistance (such as welfare)	0			
Other (specify): _____				
Total monthly income:	0			

2. List your 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
Rowley Security		Nov 2022 - Mar 2023	3,000
Triple Canopy		Jan 2018 - Oct 2023	Varied

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? _____

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial Institution	Type of Account	Amount you have	Amount your spouse has
Forum Credit Union	Checking	315.00	N/A
USAA	Checking	186.00	N/A
Navy Federal	Checking	50.00	N/A

If you are a prisoner, seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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	2800.00	(Value)
		Make & Year:	2010 Ford	
		Model:	Taurus	
		Registration #:		
Motor Vehicle #2		Other Assets (Value)		Other Assets (Value)
Make & Year:				
Model:				
Registration #:				

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	0	N/A
_____	_____	_____
_____	_____	_____

7. State every person, business, or organization to whom you or your spouse owes money, the nature of the indebtedness, and the amount owed.

Person to whom you or your spouse owe money	Nature of indebtedness (e.g., mortgage, credit card)	Amount owed	
		by you	by spouse
Capital One	Credit Card	5,000.00	N/A
Discover	Credit Card	7,800.00	
Merrick Bank	Credit Card	1200.00	
Community Wide	Car Loan	1800.00	
USAA	Credit Card	2200.00	
NelNet	Student Loan	16,000.00	

8. State the persons who rely on you or your spouse for support.

Name [or, if under 18, initials only]	Relationship	Age
Michael Greene	Child	5
_____	_____	_____
_____	_____	_____

9. 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, semiannually, or annually to show the monthly rate.

	You	Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	0	
Are real-estate taxes included?	<input type="radio"/> Yes <input type="radio"/> No	
Is property insurance included?	<input type="radio"/> Yes <input type="radio"/> No	
	You	Spouse
Utilities (electricity, heating fuel, water, sewer, and telephone)	0	
Home maintenance (repairs and upkeep)	0	

	You	Spouse
Food	0	
Clothing	0	
Laundry and dry-cleaning	0	
Medical and dental expenses	0	
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		
Life		
Health		
Motor Vehicle		
Other: _____		
Taxes (not deducted from wages or included in mortgage payments)	0	
(specify) _____		
Installment payments		
Motor Vehicle	0	
Credit card (name): _____	0	
Department store	0	
(name): _____		
Other: _____	0	
Alimony, maintenance, and support paid to others	0	
Regular expenses for operation of business, profession, or farm (attach detailed statement)	0	
Other(specify): _____	0	
Total monthly expenses:	0	

10. 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.

11. 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:

12. 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?

If yes, how much? NO

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

13. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

Im currently in a state of Barely working because of legal issues associated with thhis case.

14. State the city and state of your legal residence.

Indianapolis, IN

Your daytime phone number: (317) 496-9968

Your age: 10 Your years of schooling: =16