

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

CARLINE CURRY --- PETITIONER

VS.

CITY OF MANSFIELD 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 certiorari without prepayment of costs and to proceed in forma Pauperis.

Please check the appropriate boxes:

☐ petitioner has previously been granted leave to proceed Informa Pauperis in the following court(s):

☒ Petitioner has not previously been granted leave to proceed In forma Pauperis in any other court.

☒ Petitioner's affidavit or declaration in support of the 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. Carline Curry 8-4-2018
(Signature)

AFFAIDAVIT OR DECLARAATION
IN SUPPORT OF MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

I, Carlene Curry, am the petitioner in the above-entitled case. In support of my motion to proceed Informa Pauperis & PRO SE, I state that because of my poverty I am unable to pay the cost of this case or to give security therefore; 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 Appellant	Amount expected next month Appellant
Employment	\$ 800	\$ 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)	\$ 2612.30	\$ 0

Disability (such as social Security, insurance payments) \$_____0_____ \$_____0_____

Unemployment payments \$_____389_____ \$_____187_____

Public assistance \$_____0_____ \$_____0_____

Other (specify) \$_____0_____ \$_____0_____

Total Monthly Income \$_____3801.3_____ \$_____2790.3_____

2. List your employment history for the past two years, most recent first. (Gross Monthly is before taxes or other deductions.)

Employer Income	Address	Dates of Employment	(Gross Monthly) Income
Halcon	325 Throwman Street Crestline Ohio 44827	5-13-2017 to 1-22-2018	1600.00
UPS	875 W. Longview Ave. Mansfield, Ohio 44903 Only worked one week	11-14-2016 to 1-14-2017	2400.00
Star Tek	850 W. 4 th Street Mansfield, Ohio 44906	3-6-2017 to 4-6-2017	1600.00
Buckeye Car Wash	1856-2140 OH-309 Ontario Ohio 44906	4-6-2017 to 4-13-2017	1600.00

Iforce 875 Park Ave. W.
Mansfield, Ohio 44906

8-22-2016
to
9-3-2016

1,440

Lowe's 970 Lexington Springmill Road
Ontario, Ohio 44906

4-3-2016
to
7-3-2016

1,827.2

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 Income)
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None not married

4. How much cash do you and your spouse have \$ 0 after bills are paid. Below state any money you or your spouse have in bank accounts or in any other financial institutions.

Financial Institution Types of account, Amount you have Amount your spouse has

Chase Bank Checking \$ 0 after bills paid

US Bank Checking \$ 0 after bills paid

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

☒ Home Value \$48,000.00 ☐ Other real estate Value \$0
Buying (ZILLO)

☒ Motor Vehicle #1
and

Year, make and Model 2005 Dodge
Value 1000

☒ Motor Vehicle #2 Year, make

Model 2015 Dodge Charger
Value 19,294

☒ Motor Vehicle #3 make
84 Trans Am Value 1000

☐ Other Assets

Description None
Value

6. State every person, business, or organization owing you or your spouse money, and the amount owed. (Single eliminated spouse column)

Person owing you

Amount owed to you

Or you spouse money

None

\$ None

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

Name

Relationship

Age.

Khyier Eatmon

Grandson

9

I help if I can; if I have any free money (food)

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.

	Last Month	
	You	Spouse
Rent or home mortgage payment (Include lot rented for mobile home)	\$_334.00_	_0_
Are real estate taxes included? [Yes] [No]		
Is property insurance included? [Yes] [No]		
Utilities (electricity, heating fuel, Water, sewer, and telephone)	\$_476.0	\$_0_
Home maintenance (repairs and upkeep)	\$_37.50_	\$_0_
Food	\$_280.00_	\$_0_
Clothing	\$_0_	\$_0_
Laundry and dry-cleaning	\$_0_	\$_0_
Medical and dental expenses	\$_0_	\$_0_
Transportation (not including motor vehicle payments)	\$_200_	\$_0_
Recreation, entertainment, newspaper, magazines, etc.	\$_0_	\$_0_
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$_0_	\$_0_
Life	\$_99.00_	\$_0_
Health	\$_205.00_	\$_0_
Motor Vehicle	\$_436.86_	\$_0_

Other: Pay Day Loan \$ 150.00 \$ 0

Taxes (not deducted from wages or included in mortgage payments)

(Specify): Income Taxes & Lawyer \$ 125 \$ 0

Installment payments

Credit card(s) \$ 800.00 \$ 0

Department stores(s) (Installment Loan) \$ 226.0 \$ 0

Other: \$ 270.0 \$ 0

Alimony, maintenance, and support paid to others \$ 0 \$ 0

Regular expenses for operation of business, profession, or Farm (attach detailed statement) \$ 0 \$ 0

Other (specify): \$ 0 \$ 0

Total monthly Expenses: \$ 3639.36 \$ 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 I am going to hopefully get a job and pay down debt;

☒ Yes ☐ No Hope to get a job

10. Have you paid – or will you be paying – an attorney any money for services in connection with this case, including the completion on this form? ☐ Yes ☒ No

If yes, how much? 0

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 service in connection with this case, including completion of this form?

☐ Yes ☒ No

If yes, how much? _____0_____

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

My expenses are more than I make. I needed a job. I have been unemployed since January 23, 2018.

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

Executed on: August 4, 2018

Carline Curry
(Signature)

Carline Curry
606 Bowman Street
Mansfield, Ohio 44903
567-274-9130