

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

Linh Thi Minh Tran — PETITIONER
(Your Name)

VS.

Kathy Hung pham — 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):

United States District Court in portland oregon
Case NO: 3:16-cv-01971-HZ; 3:16-cv-0707-AC

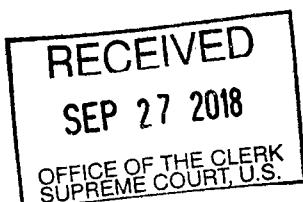
☐ Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

☒ 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.



Linh Thi Minh Tran
(Signature)
09/04/2018
Linh Thi Minh Tran
DOB: 04/14/1970
4 digits SS # 6218
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**AFFIDAVIT OR DECLARATION
IN SUPPORT OF MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

I, Linh Thi Minh Tran, 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
Non employment because <u>Severe body injury and damage and visual defect</u>				
Employment	\$ _____	\$ _____	\$ _____	\$ _____
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): <u>rooms for rent where I am living at 12542 SE capella court, Happy Valley OR, 97086</u>	\$ _____	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ 750	\$ _____	\$ _____	\$ _____

Not enough for property tax and court defenal fees

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2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.) *non employment because body injury and damage and sexual defect*

Employer	Address	Dates of Employment	Gross monthly pay
			\$
			\$
			\$

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
<i>non employment</i>			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ *after pay utilities this month \$500*
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
		\$	\$
		\$	\$
		\$	\$

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

* *1 property 8225 SE Raymond Ct, Portland, OR 97266 has been foreclosed*
☐ Home *is valid through an auction* ☐ Other real estate
 Value *Sheriff Sale on 05/29/2018* Value _____
Pending Appeal case no: A166423, 15CV28929 in Oregon Court of Appeals
☐ Motor Vehicle #1 * *1 property 12542 SE Capella Court, Happy Valley, OR 97086* ☐ Motor Vehicle #2
 Year, make & model *is threatened foreclosed* Year, make & model _____
 Value *but not yet* Value _____
no car vehicle. Gold Dodge car was sold \$100 long time ago.
☐ Other assets
 Description *one rings and one ears*
 Value _____

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6. State every person, business, or organization owing you or your spouse money, and the amount owed. *No spouse, no children, never married, never have children*

Person owing you or your spouse money

Amount owed to you

Amount owed to your spouse

- 1) * *Timmet 2 cases still pending in Oregon court of Appeals. Fannie Mae in valid foreclosure is*
- 2) *Still pending case in Oregon court of Appeals.*
- 3) *Liberty Mutual in insurance can accident*
- 4) *Kathy Hung pham US Supreme Court*
- 5) *Clear Deutsche, HER 3, Owen still pending \$ case in Oregon Court of Appeals*
- 6) *Happy Valley Municipal court \$ in US Supreme Court*
- 7) *Ryan Kersey officer is still \$ pending case in US District Court*
- 8) *Danyn Kral and Benjamin Tobo's still pending case in US District Court*
- 9) *Social Security Administrator Disability benefit case pending in U.S District Court*
- 10) *Christopher Lee Blocker is still owed money*
- 11) *Amber Mercer, Chelsea Huntz, Maile Luna, Tisham Allan, John Sean.*

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

Name

Relationship

Age

Name	Relationship	Age

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)

Are real estate taxes included? ☐ Yes ☐ No

Is property insurance included? ☐ Yes ☐ No

Utilities (electricity, heating fuel, water, sewer, and telephone)

Home maintenance (repairs and upkeep)

Food

Clothing

Laundry and dry-cleaning

Medical and dental expenses

\$ _____ \$ _____

over said in insurance

property \$ 2700/year

property tax not including \$ 6000/year

\$ 250/month \$ _____

100/month \$ _____

\$ 60/month \$ _____

\$ 40/month \$ _____

\$ 300/month \$ _____

\$ _____ \$ _____

\$ 200 \$ _____

\$ _____ \$ _____

\$ 20 \$ _____

\$ _____ \$ _____

prescription a lot of money

\$ Caravan \$ 50 \$ _____

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	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>60</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>130/month</u>	\$ _____
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)		
(specify): <u>property tax spending</u>	\$ <u>6000/year</u>	\$ _____
Installment payments		
Motor Vehicle	\$ _____	\$ _____
Credit card(s)	\$ _____	\$ _____
Department store(s)	\$ _____	\$ _____
Other: <u>court official fees</u>	\$ <u>12,500</u>	\$ _____
<u>court transcript fees</u>	\$ <u>6,000</u>	\$ _____
<u>hood wear garbage</u>	\$ <u>50/month</u>	\$ _____
<u>landscaping maintenance 12542 SE capella</u>	\$ <u>160/month</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>60-80/month</u>	\$ _____
<u>personal hygiene</u>	\$ _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ _____
Other (specify): <u>home maintenance, clean extra</u>	\$ <u>200</u>	\$ _____
<u>carpet cleaning pay extra</u>	\$ <u>2500</u>	\$ _____
Total monthly expenses:	\$ <u>2500</u>	\$ _____

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that why
 not enough
 money cover
 for property
 tax every year

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? _____

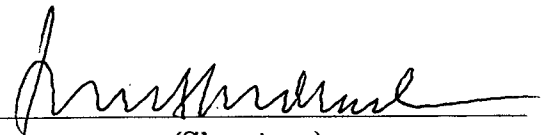
12. Provide any information that will help explain why ^I ~~you~~ cannot pay the costs of this case?
~~If yes, state the person's name, address, and telephone number:~~

I am disability, physical health severe injury and damage, brain damages tumor, vision defect and retinal detachment, severe back pain, severe asthma, shortness breath, demyelinating brain damages, unemployment and not enough income every month to cover my living expense.

12. 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: 09/04/2018, 20__



(Signature)

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