

NO. _____

IN THE SUPREME COURT OF THE UNITED STATES

MARY DANIELAK,

Petitioner,

v.

SEAN BREWER,

Respondent.

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Petitioner Mary Danielak respectfully asks this Honorable Court for leave to proceed *in forma pauperis* so that she may file the accompanying Petition for Writ of Certiorari with this Court. Petitioner was represented by pro bono counsel in the United States Court of the Appeals for the Sixth Circuit and proceeded pro se in the district court. Petitioner is currently indigent and cannot afford the costs associated with prosecuting this appeal on a paid basis. An affidavit of indigence is attached to this motion. Ms. Danielak therefore eligible to proceed *in forma pauperis* under Supreme Court Rule 39.

Respectfully submitted,

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Federal Appellate Litigation Clinic
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(734) 763-4319
Pro Bono Counsel for Petitioner

Dated: December 20, 2018

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

I, McLynne Danielah, 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	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Self-employment	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Income from real property (such as rental income)	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Interest and dividends	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Gifts	\$ 250	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Alimony	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Child Support	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Retirement (such as social security, pensions, annuities, insurance)	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Disability (such as social security, insurance payments)	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Unemployment payments	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Public-assistance (such as welfare)	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Other (specify): _____	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a	\$ 0 n/a
Total monthly income:	\$ 250	\$ 0	\$ 0	\$ 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
M.O.O.C	3201 Benis Rd yesterday yesterday	July 2016 / July 2018	\$ 18.00
			\$
			\$

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
Ø N/A	N/A	N/A	\$ Ø N/A
Ø N/A	N/A	N/A	\$ Ø N/A
Ø N/A	N/A	N/A	\$ Ø 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.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
Trust account	\$ 300	\$ Ø N/A
	\$	\$ Ø N/A
	\$	\$ Ø N/A

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

<input type="checkbox"/> Home Value	Ø N/A	<input type="checkbox"/> Other real estate Value	Ø N/A
<input type="checkbox"/> Motor Vehicle #1 Year, make & model	Ø N/A	<input type="checkbox"/> Motor Vehicle #2 Year, make & model	Ø N/A
Value	Ø N/A	Value	Ø N/A
<input type="checkbox"/> Other assets Description	Ø N/A		
Value	Ø N/A		

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
\$ 0 N/A	\$ 0 N/A	
\$ 0 N/A	\$ 0 N/A	
\$ 0 N/A	\$ 0 N/A	

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
\$ 0 N/A		
\$ 0 N/A		
\$ 0 N/A		

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)	\$ 0 N/A	\$ 0 N/A
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 0 N/A	\$ 0 N/A
Home maintenance (repairs and upkeep)	\$ 0 N/A	\$ 0 N/A
Food	\$ 210	\$ 0 N/A
Clothing	\$ 460	\$ 0 N/A
Laundry and dry-cleaning	\$ 0 N/A	\$ 0 N/A
Medical and dental expenses	\$ 0 N/A	\$ 0 N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Life	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Health	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Motor Vehicle	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Other: _____	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Installment payments		
Motor Vehicle	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Credit card(s)	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Department store(s)	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Other: _____	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Alimony, maintenance, and support paid to others	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Other (specify): _____	\$ <u>DN/A</u>	\$ <u>DN/A</u>
Total monthly expenses:	<u>\$ 270</u>	\$ <u>DN/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.

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? _____

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

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

I am a Ward of the State.

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

Executed on: December 12, 2018

Mayly Dell
(Signature)

Subscribed and sworn to before me on
12 day of December, 2018

Renata Fracz, Notary Public
Oakland County, Michigan
My Commission Expires: 05/29/2020

Renata Fracz
RENATA FRACZ
NOTARY PUBLIC, STATE OF MI
COUNTY OF OAKLAND
MY COMMISSION EXPIRES May 29, 2020
ACTING IN COUNTY OF
Westenau