

No. 18-7250

ORIGINAL

FILED

DEC 14 2018

OFFICE OF THE CLERK
SUPREME COURT, U.S.

IN THE
SUPREME COURT OF THE UNITED STATES

Diane S. Jones — PETITIONER
(Your Name)

VS.

Samson Resources — RESPONDENT(S)
et al

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):

Third circuit Court of Appeals

☐ 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.

Diane A Jones
(Signature)

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

I, Diane S Jones, 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	\$ <u>0</u>	\$ <u>3000.00</u>	\$ <u>0</u>	\$ <u>3540.00</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>62.00</u>	\$ <u>62.00</u>	\$ <u>250.00</u>	\$ <u>250.00</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>1273.00</u>	\$ <u>0</u>	\$ <u>601.00</u>
VA Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>1083.</u>	\$ <u>0</u>	\$ <u>742.00</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>MINISTRY engagements/sand</u>	\$ <u>25.00</u>	\$ <u>25.00</u>	\$ <u>0</u>	\$ <u>100</u>
Total monthly income:	\$ <u>87</u>	\$ <u>5443.00</u>	\$ <u>250.00</u>	\$ <u>5233.00</u>

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
Onsite Nursing Care	18024 CALABAR DR GAINESBURG MD 20877	10-16-17 - 10-29-17	\$ 449.50
			\$
			\$

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
Veterans Aff	EYE ST WASHINGTON DC	Past 5 years	\$ 4,746.00
			\$
			\$

4. How much cash do you and your spouse have? \$ 45.00
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
USAA Checking	\$ 0	\$ 30.00
Navy Fed Checking	\$ 5.00	\$ 0
Chase Checking	\$ 0	\$ 0

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

☒ Home

Value 255,000.00

☐ Other real estate

Value 0

☒ Motor Vehicle #1

Year, make & model 2013 BMW X1

Value 18,000.00

☒ Motor Vehicle #2

Year, make & model 1999 Mercedes Benz E320

Value 500.00

☒ Other assets

Description guitars, key boards, amps, mics, mixers

Value Approx 5000.00

- Person owing you or your spouse money**

Amount owed to your spouse

NA

\$ _____

\$ _____

N/A

\$ _____

\$ _____

\$ _____

\$_____

- Name

Relationship

Age

N/A

- You**

Your spouse

- \$ 0

\$ 1576.07

☒ Yes ☐ No

☒ Yes ☐ No

- \$ 0

\$ 328.00

- \$ 0

\$ 100.00

- pd by source \$ 150.00 → \$ 150.00

- pd by source \$ 15.00 → \$ 15.00

- \$ 0 \$ 0

- \$ 0 \$ 14.00

	You	Your spouse
<i>GAS</i> Transportation (not including motor vehicle payments) <i>pd by spouse</i>	\$ <u>250.00</u>	\$ <u>85.00</u>
✓ Recreation, entertainment, newspapers, magazines, etc.	\$ <u>120.00</u>	\$ <u>240.00</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>62.00</u>
Life	\$ <u>0</u>	\$ <u>117.00</u>
Health	\$ <u>0</u>	\$ <u>144.00</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>138.00</u>
Other: <u>Auto Warranty (2 months)</u>	\$ <u>0</u>	\$ <u>20.00</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ <u>0</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>500.00</u>
Credit card(s)	\$ <u>0</u>	\$ <u>50.00</u>
Department store(s) <u>Synchrony</u>	\$ <u>0</u>	\$ <u>80.00</u>
Other: <u>Starling</u>	\$ <u>0</u>	\$ <u>125.00</u>
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>250.00</u>	\$ <u>0</u>
Other (specify): <u>Cell phone / Internet</u>	\$ <u>250.00</u>	\$ <u>83.00</u>
Total monthly expenses:	\$ <u>1,035.00</u>	\$ <u>3829.00</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 ☒ In the past - not presently

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? printing services past

☒ Yes ☐ No

If yes, how much? present 426.00

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

* Office Depot

Waldorf MD.

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

We are behind in bills + late payments for home due to the expenses of this case since its been ongoing for years. Husbands VA Benefit cut by 1000.00 per month 8/20/8

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

Executed on: 12/14, 2018

My County of Anne Arundel Commonwealth/State of Md.
I hereby certify that the attached document is a true and exact copy of a NOTE, presented before

(type of document)
me this 14th day of December, 2018

Germell Brown
Notary Public
My commission expires 01/14, 2020

Germell Brown
(Signature)

GERMELL BROWN
NOTARY PUBLIC STATE OF MARYLAND
My Commission Expires January 14, 2020