

No. 18-9184

IN THE
SUPREME COURT OF THE UNITED STATES

ORIGINAL

Supreme Court, U.S.
FILED

APR 02 2019

OFFICE OF THE CLERK

Michael B. White
Darla K. White, deceased
Petitioner

v

Colleen K. Corcoran, Chapter 7 Trustee
Frankenmuth Credit Union,
Respondents

**MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERS
FOR
PETITION FOR A WRIT OF CERTIORARI**

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed in forma pauperis.

Petitioner was previously granted leave to proceed in forma pauperis in this matter on March 20, 2018, case 1:17-cv-12394-TLL-PTM, Docket #19, the U.S. District Court, Eastern District of Michigan, Northern Division granted leave to proceed in forma pauperis from the district court to the 6th Circuit Court of Appeals.

Petitioner's affidavit, dated April 2, 2019, in support of this motion is attached.

May 3, 2019

X Michael B. White

Michael B. White & Darla K. White, dec.
11255 Block Road
Birch Run, MI 48415
Tel 989-780-2110

UNITED STATES SUPREME COURT

Michael B. White & Darla K. White, deceased,)
)
Petitioner)
)
v.)
)
Colleen K. Corcoran, Chapter 7 Trustee)
Frankenmuth Credit Union,)
)
Respondents)
)
)
)
)
Case No. _____

**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.)

Signed: x Michael White

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.

Date: Apr 2, 2019

My issues on appeal are: 11 USC 506(c) property preservation and care costs and expenses paid while in Chapter 11 and Chapter 7 bankruptcy, request for reimbursement of amounts paid. Case 13-21977-dob E. D. Michigan N. D., Bay City. Appealed to U.S. District Court then to 6th Circuit COA.

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	\$0	\$0	\$0
Self-employment	\$0	\$0	\$00	\$
Income from real property (such as rental income)	\$0	\$0	\$0	\$0
Interest and dividends	\$0	\$0	\$0	\$0
Gifts	\$0	\$0	\$0	\$0
Alimony	\$	\$	\$	\$
Child support	\$0	\$0	\$0	\$0
Retirement (such as social security, pensions, annuities, insurance)	\$782	\$0	\$782	\$0
Disability (such as social security, insurance payments)	\$0	\$0	\$0	\$0
Unemployment payments	\$0	\$0	\$0	\$0
Public-assistance (such as welfare)	\$0	\$0	\$0	\$0
Other (specify):	\$0	\$0	\$0	\$0
Total monthly income:	\$782	\$0	\$782	\$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
Jones Exc, Inc.	4515 McIntosh Rd Birch Run MI 48415	Approx. Nov. 2015 to May 30, 2018	\$1,276.00

			\$
			\$

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
None, spouse deceased			\$
			\$
			\$

4. *How much cash do you and your spouse have? \$450.99*

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
Chase	checking	\$450.99	\$0
		\$	\$
		\$	\$

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	Other real estate	Motor vehicle #1
(Value) \$15,000	(Value) \$1,000	(Value) \$2,500

		Make and year: Chevy 2008
		Model: Impala
		Registration #:89186364

Motor vehicle #2	Other assets	Other assets
(Value) \$300	(Value) \$unknown	(Value) \$ unknown
Make and year: Chevy 1991	Bankruptcy case 13-21977 Dockets 486, 567,	Hay crop in litigation
Model: 1500 pickup		
Registration #: 1105850		

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
none	\$0	\$0
	\$	\$
	\$	\$
	\$	\$

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

Name [or, if under 18, initials only]	Relationship	Age
none		

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

	You	Your Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$0	\$0
Are real estate taxes included? [] Yes [x] No		
Is property insurance included? [] Yes [x] No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$200	\$0
Home maintenance (repairs and upkeep)	\$100	\$0
Food	\$250	\$0
Clothing	\$10	\$0
Laundry and dry-cleaning	\$0	\$0
Medical and dental expenses	\$0	\$0
Transportation (not including motor vehicle payments)	\$0	\$0
Recreation, entertainment, newspapers, magazines, etc.	\$20	\$0
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	\$0	\$0
Life:	\$0	\$0
Health:	\$0	\$0
Motor vehicle:	\$0	\$0
Other:	\$0	\$0
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$0	\$0
Installment payments		
Motor Vehicle:	\$0	\$0
Credit card (name):	\$0	\$0
Department store (name):	\$0	\$0
Other:	\$0	\$0
Alimony, maintenance, and support paid to others	\$0	\$0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$200	\$0

Other (specify):	\$0	\$0
Total monthly expenses:	\$780	\$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?*

Already received 2018 tax return, spent on bills.

Yes No

If yes, describe on an attached sheet.

10. *Have you spent — or will you be spending — any money for expenses or attorney fees in connection with this lawsuit? Yes No copy fees*

If yes, how much? \$ 15 estimate

11. *Provide any other information that will help explain why you cannot pay the docket fees for your appeal. Only receiving social security, had quit working because my back and other joints were hurting. Currently, looking for less labor intensive work.*

12. *State the city and state of your legal residence.*

Your daytime phone number: 989-780-2110

Your age: 60 Your years of schooling: 14

Last four digits of your social-security number: 1524