

18-9727 ORIGINAL
No.

IN THE
Supreme Court of the United States

SHANTA G. PHILLIPS-BERRY
Petitioner
V.

Donald J. Trump, President of United States; Department of Justice of the State of Louisiana, Litigation Division; United States Military; Facebook; Uber; lyft, L.L.C.; Enterprise Leasing Company; Entergy of Louisiana; Louisiana Disciplinary Board Office of Disciplinary Counsel; Hollywood Productions; Department of Transportation; Health and Hospitals Department of Louisiana; Office of Motor Vehicle Louisiana; Social Security Office of Louisiana; Department of Family Services Louisiana; Housing Authority Louisiana; Department of Transportation Department; Department of Justice of Louisiana; Department of environmental Quality State of Louisiana; Communication Service of Louisiana; Entergy Louisiana L.L.C.,
Repondents

MOTION FOR LEAVE TO PROCEED IN FORMAT 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):

In the United States Court of Appeals for the Fifth Circuit

United States District Court of the Eastern District of Louisiana

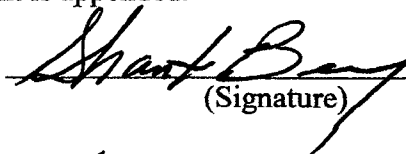
Petitioner has **not** previously been granted leave to proceed in *forma pauperis* in any other court.

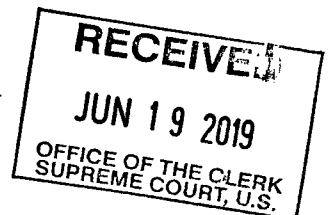
Petitioner affidavit or declaration in support of this motion is attached hereto.

Petitioner's affidavit or declaration in **not** attached because the court below appointed counsel in their current proceeding, and :

The appointment was made under the following provision of law _____, or

a copy of the order of appointment is appended.


(Signature)



No.

AFFIDAVIT OR DECLARATION

IN SUPPORT OF MOTIN FOR LEAVE TO PROCEED *IN FORM PAUPERIS*

I, Shanta G. Phillips-Berry, 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 cost of 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 andy amount that was received weeklym biweekly, quarterly, semiannually, or annually to show ther monthly rate. Use gross amounts, that is amounts before andy dedcutions 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	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividents	\$ 0	\$ 0	\$ 0	\$ 0
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement(such as social Security, pensions, annuities, insurance)	\$ 666.00	\$ 0	\$ 0	\$ 0
Disability(such as social security, insurance payments)	\$ 125.00	\$ 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:	\$791.00	\$ 0	\$ 0	\$ 0

No.

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

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

4. How much asch do you and your spouse have? \$ _____

Below, state any money you or yur spuse 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
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USAA checking	\$ 100.00	\$ 0
USAA checking	\$ 100.00	\$ 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 N/A

Other real estate
Value N/A

Motor Vehicle #1
Year, Make & Model N/A

Motor Vehicle #2
Year, Make & Model N/A

Other assets

Descriptions N/A

Value N/A

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or spouse your spouse money	Amount owed to you	Amount owed to your spouse
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

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
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

8. Estimate the average monthly expense 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 \$ <u> </u> (include lot rented for mobile home)	\$ <u>380</u>	
Are real estate taxes included?	Yes	No
Is property insurance included?	Yes	No
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>100</u>	\$ <u>N/A</u>
Home maintenance (repairs and upkeep)	\$ <u>60</u>	\$ <u>N/A</u>
Food	\$ <u>100</u>	\$ <u>N/A</u>
Clothing	\$ <u>100</u>	\$ <u>N/A</u>
Laundry and dry-cleaning	\$ <u>60</u>	\$ <u>N/A</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>N/A</u>

	You	Your Spouse
Transportation (not including motor vehicle payment)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, et.	\$ <u>0</u>	\$ <u>0</u>
Insurance (not deducted from wages or include in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>0</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or include in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ <u>0</u>
Installment payments	\$ <u>0</u>	\$ <u>0</u>
Mortor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit card(s)	\$ <u>50</u>	\$ <u>0</u>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: _____		
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expense for operation of business, profession, or farm(attach detailed statement)		
Other (specify): _____	\$ <u>0</u>	\$ <u>0</u>
Total monthly expenses:	\$ <u>50</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 declare under penalty of perjury that the foregoing is true and correct.

Executed on: May 17, 2019

Shant Berry
(Signature)