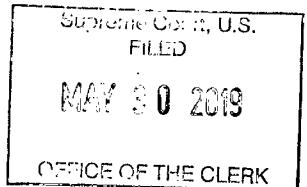


19-5019 No. \_\_\_\_\_ **ORIGINAL**

IN THE  
SUPREME COURT OF THE UNITED STATES



Jennifer Perez — PETITIONER  
(Your Name)

VS.

Paul G. Dwyer, Esq. — 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):

District Court, Third District Court of Appeals, Supreme Court of Florida

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.

Jennifer Perez  
(Signature)

RECEIVED

JUN 3 - 2019

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, Jennifer Perez, 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	\$ 4,823.50	\$ 0 n/a	\$ 0	\$ 0 n/a
Self-employment	\$ 0	\$ n/a	\$ 0	\$ n/a
Income from real property (such as rental income)	\$ 0	\$ n/a	\$ 0	\$ n/a
Interest and dividends	\$ 0	\$ n/a	\$ 0	\$ n/a
Gifts	\$ 0	\$ n/a	\$ 0	\$ n/a
Alimony	\$ 0	\$ n/a	\$ 0	\$ n/a
Child Support	<i>stopped \$2,000 (until July 2012)</i>	\$ n/a	\$ 0	\$ n/a
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ n/a	\$ 0	\$ n/a
Disability (such as social security, insurance payments)	\$ 0	\$ n/a	\$ 0	\$ n/a
Unemployment payments	\$ 0	\$ n/a	\$ 0	\$ n/a
Public-assistance (such as welfare)	\$ 342	\$ n/a	\$ 342	\$ n/a
Other (specify): <u>Medicaid</u> \$ full for given copy to Paul	\$ n/a	\$ full for him \$ n/a I, seat copy 2 Paul	\$ 0	\$ n/a
Total monthly income:	\$ 6,823.50	\$ n/a	\$ 0	\$ n/a

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
Robert half S.S Disability Denied 2x's	Temp N/A	10 days N/A	\$ 427.00 + 473.00 \$ N/A \$

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.) Divorce

Employer	Address	Dates of Employment	Gross monthly pay
N/A			\$ \$ \$

4. How much cash do you and your spouse have? \$ 0  
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., <u>checking</u> or savings)	Amount you have	Amount your spouse has
	\$ ~ 2.16	\$ 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 0

Other real estate  
Value 6

Motor Vehicle #1  
Year, make & model 0  
Value \_\_\_\_\_

Motor Vehicle #2  
Year, make & model 0  
Value \_\_\_\_\_

Other assets  
Description 0  
Value \_\_\_\_\_

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	\$ 0	\$ 0
	\$ _____	\$ _____
	\$ _____	\$ _____

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
Grant Michael Dwyer (until taken away)	Son	10
Aug 31, 2018		
per CDR order		

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)	\$ 1100.00	\$ 1
Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 129.00 + 90.00	\$ _____
Home maintenance (repairs and upkeep)	\$ 12	\$ _____
Food	\$ Food stamps	\$ _____
Clothing	\$ 0	\$ _____
Laundry and dry-cleaning	\$ 20.00	\$ _____
Medical and dental expenses	\$ medical	\$ _____

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ _____
Life	\$ <u>0</u>	\$ _____
Health	\$ <u>0</u>	\$ _____
Motor Vehicle	\$ <u>264.60</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ _____
Installment payments		
Motor Vehicle	\$ <u>269.70</u>	\$ _____
Credit card(s)	\$ <u>0</u>	\$ _____
Department store(s)	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ _____
Other (specify): _____	\$ <u>0</u>	\$ _____
<b>Total monthly expenses:</b>	<b>\$ <u>1,877.70</u></b>	\$ _____

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:

N/2

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

Due to the money I have borrowed until all this  
loan

Court madness is over and my doctors clear me for work  
again I am not able to pay,

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

Executed on: May 30, 2019

STATE OF FLORIDA  
COUNTY OF MIAMI-DADE

Sworn to (or affirmed) and subscribed before me  
this 30 day of May, 2019 by Jennifer Perez  
who is personally known to me or has produced  
identification type of ID Driver's License

(SEAL)

NOTARY SIGNATURE

Jennifer Perez

PRINT, STAMP, OR TYPE NOTARY NAME



JIM R. RENE  
NOTARY PUBLIC  
STATE OF FLORIDA  
Comm# GG237668  
Expires 8/14/2022

(Signature)

Jennifer Perez