

ORIGINAL

No. 19-5249

IN THE
SUPREME COURT OF THE UNITED STATES

FILED
MAY 06 2019
OFFICE OF THE CLERK
SUPREME COURT, U.S.

GEORGE E. KERSEY - PETITIONER

VS.

HERB CHAMBERS ET AL.- RESPONDENTS

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*.

Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

UNITED STATES DISTRICT COURT FOR MASSACHUSETTS;
U.S. COURT OF APPEALS FOR THE FIRST CIRCUIT

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

Petitioner's affidavit or declaration in support of 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


George E. Kersey

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

I, George E. Kersey, 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	\$ None	\$ None	\$ None	\$ None
Self-employment	\$ None	\$ None	\$ None	\$.. None
Income from real property (such as rental income)	\$ None	\$ None	\$ None	\$.. None
Interest and dividends	\$ None	\$ None	\$ None	\$ None
Gifts	\$ None	\$ None	\$ None	\$ None
Alimony	\$ None	\$ None	\$ None	\$ None
Child Support	\$ None	\$ None	\$ None	\$ None
Retirement (such as social security, pensions, annuities, insurance)	\$1,600.00	\$ None	\$1,600.00	\$ None
Disability (such as social security, ins payments)	\$ None	\$ None	\$ None	\$ None
Unemployment payments	\$ None	\$ None	\$ None	\$ None
Public-assistance (such as welfare)	\$ None	\$ None	\$ None	\$ None
Other (specify): _____	\$ None	\$ None	\$ None	\$ None
Total monthly income:	\$ 1,600	\$ None	\$ 1,600	\$ None

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
Sears	Natick, MA	March 2006 (s weeks)	\$600

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.)

None

Employer	Address	Dates of Employment	Gross monthly pay
None			

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. About \$200.00

Financial institution **Type of account** **Amount you have** **Amount spouse has**

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

0 Home	None	0 Other real estate
Value	None	Value

0 Motor Vehicle #1	0 Motor Vehicle #2
Year, make & model	Year, make & model
Value	Value
None	None

0 Other assets	0 Other assets
Description	Description
Value	Value
None	None

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	\$	\$
	\$	\$

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

Name	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, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u> </u> <u>400</u> <u> </u>	\$ <u> </u> <u>None</u> <u> </u>
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)	\$ <u> </u> <u>25</u> <u> </u>	\$ <u> </u> <u> </u>
Home maintenance (repairs and upkeep)	\$ <u> </u> <u>None</u> <u> </u>	\$ <u> </u> <u> </u>
Food	\$ <u> </u> <u>240</u> <u> </u>	\$ <u> </u> <u> </u>
Clothing	\$ <u> </u> <u>None</u> <u> </u>	\$ <u> </u> <u> </u>
Laundry and dry-cleaning	\$ <u> </u> <u>None</u> <u> </u>	\$ <u> </u> <u> </u>
Medical and dental expenses	\$ <u> </u> <u>(VA)</u> <u> </u>	\$ <u> </u> <u> </u>

Transportation (not including motor vehicle payments) **None** **None**

Recreation, entertainment, newspapers, magazines, etc. **None** **None**

Insurance (not deducted from wages or included in mortgage payments)

 Homeowner's or renter's **None** **None**

 Life **None** **None**

 Health **None** **None**

 Motor Vehicle **None** **None**

Taxes (not deducted from wages or included in mortgage payments)
(specify): **None**

Installment payments

Motor Vehicle	None	None
Credit card(s)	\$200	None
Department store(s)	None	None
Other:	None	None

Alimony, maintenance, and support paid to others **None**

Regular expenses for operation of business, profession,
or farm (attach detailed statement) See attachment

Other (specify): **None**

Total monthly expenses: **about \$800**

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

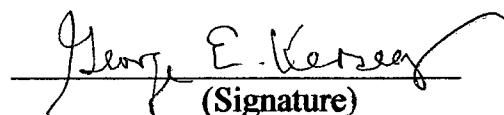
If yes, how much?

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. Since my improper disbarment by New Hampshire on the basis that I violated local rules, which I did not, (as found by New Jersey)followed by Massachusetts and the District of Columbia, I have been unable to obtain any paying clients

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

Executed on: July 5, 2019


(Signature)