

ORIGINAL

Supreme Court, U.S.
FILED

AUG 19 2019

OFFICE OF THE CLERK

No. 19-5674

IN THE
SUPREME COURT OF THE UNITED STATES

ED TEAGUE, II -

PETITIONER

vs.

REGENT FINANCIAL GROUP, INC.; GINNIE MAE; GINNIE MAE, AS
TRUSTEE FOR SECURITIZED TRUST GINNIE MAE REMIC 2011-066
TRUST; FLAGSTAR BANK, FSB; MORTGAGE ELECTRONIC
REGISTRATION SYSTEMS, INC.; and PLANET HOME LENDING, LLC -

RESPONDENTS

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The Petitioner, Ed Teague, II, asks leave to file the attached petition for a writ
of certiorari without prepayment of costs and to proceed *in forma pauperis*.

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

Ed Teague
Ed Teague, II
Pro Se Petitioner
Post Office Box 658
Torrington, Wy 82240
audiopro1@msn.com

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

I, Ed Teague, 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>3068</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</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>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>4050</u>	\$ <u>1080</u>	\$ <u>1350</u>	\$ <u>0</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>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>5851.75</u>	\$ <u>1080</u>	\$ <u>1350</u>	\$ <u>0</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
Union Pacific	Omaha Ne	8-20-18 to 6-19	\$ 5849
			\$
			\$

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
Walmart	Scottsbluff Ne		\$ 0
			\$
			\$

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.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
Checking	\$ 25	\$ 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 _____

Other real estate
 Value _____

Motor Vehicle #1
 Year, make & model 06 Suzuki SX4
 Value 1200

Motor Vehicle #2
 Year, make & model 92 Chevy S10
 Value 400

Other assets
 Description 81 Chevy K10
 Value 400

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
Na	\$ 0	\$ 0
Na	\$ 0	\$ 0
Na	\$ 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
NA	NA	NA
NA	NA	NA
NA	NA	NA

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)	\$ 600 month	\$
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)	\$ 80 100	\$
Home maintenance (repairs and upkeep)	\$ 30 10	\$
Food	\$ 150 100	\$ 150 100
Clothing	\$ 30 10	\$ 30 10
Laundry and dry-cleaning	\$ 15 10	\$ 15 10
Medical and dental expenses	\$ 30	\$ 30

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 150	\$ 100
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ 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	\$ 183	\$ 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(s)	\$ 65	\$ 0
Department store(s)	\$ 0	\$ 0
Other: <u>phone</u>	\$ 118	\$ 045
Alimony, maintenance, and support paid to others	\$ 0	\$ 0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ 0
Other (specify): _____	\$ 0	\$ 0
Total monthly expenses:	\$ 1386	\$ 370

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.

Attachment 1

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? ~~800~~ \$ 775

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

NDPH Paralegal Services 914-655-5052
860 Clayhole Rd
Dunn, NC 28334

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: 8-15-2019, 2019

Ed League
(Signature)

Attachment 1

Due to the uncertainty and progression of an illness called Neurocardiogenic Syncope affecting my neurological and cardiovascular system, I have been and will be unable to return to work. I am in the process of being medically retired which takes roughly 1-2 years to process. My health as well as other medical issues of my spouse have greatly affected her ability to work as she is also currently on short term disability but is desperately seeking release to go back to her current position. As of this date, her health is not under control enough to allow that.

Ed Teague