

19-5823

ORIGINAL

No. \_\_\_\_\_

Supreme Court, U.S.  
FILED

JUL 29 2019

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

JASON ALSTON

— PETITIONER

(Your Name)

VS.

ARIANNA W. EASTMAN;  
ANNETTE M. THOMAS

— RESPONDENT(S)

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

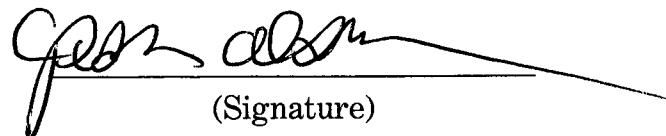
The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

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

In United States District Court for the Northern District of Mississippi Greenville Division; In Supreme Court of the United States; In United States District Court Northern District of Georgia Atlanta Division and In United States District Court for the Southern District of Mississippi Jackson Division

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.

  
(Signature)

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SUPREME COURT, U.S.

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

I, JASON ALSTON, 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.

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
Employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Self-employment	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Gifts	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Alimony	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Child Support	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>758.00</u>	\$ <u>N/A</u>	\$ <u>758.00</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<b>Total monthly income:</b>	<b>\$ <u>758.00</u></b>	<b>\$ <u>0.00</u></b>	<b>\$ <u>758.00</u></b>	<b>\$ <u>0.00</u></b>

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
N/A	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00

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.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
N/A	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00
N/A	N/A	N/A	\$ 0.00

4. How much cash do you and your spouse have? \$ 2.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

<b>Financial institution</b>	<b>Type of account</b>	<b>Amount you have</b>	<b>Amount your spouse has</b>
MEMBER EXCHANGE	SAVING&CHECKING	\$ 1.00	\$ N/A
REGIONS BANK	CHECKING	\$ 1.00	\$ N/A
N/A	N/A	\$ 0.00	\$ N/A

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  
Value N/A

Motor Vehicle #2  
Year, make & model N/A  
Value N/A

Other assets  
Description N/A  
Value N/A

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

<b>Person owing you or your spouse money</b>	<b>Amount owed to you</b>	<b>Amount owed to your spouse</b>
N/A	\$ 0.00	\$ N/A
N/A	\$ 0.00	\$ N/A
N/A	\$ 0.00	\$ N/A

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

<b>Name</b>	<b>Relationship</b>	<b>Age</b>
NONE	N/A	N/A
NONE	N/A	N/A
NONE	N/A	N/A

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.

	<b>You</b>	<b>Your spouse</b>
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 200.00	\$ N/A
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)	\$ 125.00	\$ N/A
Home maintenance (repairs and upkeep)	\$ 0.00	\$ N/A
Food	\$ 75.00	\$ N/A
Clothing	\$ 0.00	\$ N/A
Laundry and dry-cleaning	\$ 0.00	\$ N/A
Medical and dental expenses	\$ 0.00	\$ N/A

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ 0.00	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0.00	\$ N/A
Life	\$ 0.00	\$ N/A
Health	\$ 0.00	\$ N/A
Motor Vehicle	\$ 0.00	\$ N/A
Other: N/A	\$ 0.00	\$ N/A
Taxes (not deducted from wages or included in mortgage payments)		
(specify): N/A	\$ 0.00	\$ N/A
Installment payments		
Motor Vehicle	\$ 0.00	\$ N/A
Credit card(s)	\$ 0.00	\$ N/A
Department store(s)	\$ 0.00	\$ N/A
Republic Finance Loan Company \$215.00		
Member Exchange Credit Union Bank \$125.00	\$ 340.00	\$ N/A
Other: (See Attachments)		
Alimony, maintenance, and support paid to others	\$ 0.00	\$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$ N/A
Other (specify): N/A	\$ 0.00	\$ N/A
<b>Total monthly expenses:</b>	<b>\$ 740.00</b>	<b>\$ 0.00</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? \_\_\_\_\_ N/A

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

N/A

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? \_\_\_\_\_ N/A

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

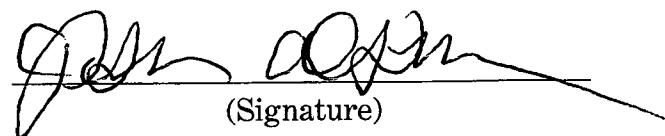
N/A

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

I receive Social Security Benefits in the amount of \$758.00 and expect to receive that amount next month. I Pay Republic Finance loan company \$215.00 monthly until the amount \$4,515.00 is payed in full. I Pay Member Exchange Credit Union Bank \$125.00 monthly, until \$2,299.40 is pay in full. I can not afford to pay the cost of this case.

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

Executed on: July 29, 20 19

  
(Signature)

Republic Finance, LLC  
Kosciusko, MS 39090-0609  
(662)289-4511  
Date 7/3/2019 10:37 AM  
Date 7/3/2019 10:37 AM  
Transaction Date 7/3/2019  
MT:6296022:066252/062981

Beg Bal	\$4,730.00
Principal	\$215.00
Other	\$0.00
New Bal	\$4,515.00
Late Chg	\$0.00
Exp Int	\$0.00
Amount Paid	\$215.00
Change	\$0.00

RE-PRINT FROM ORIGINAL RECEIPT  
Jason Alston  
223 3rd Ave  
Kosciusko, MS 39090  
Customer Copy



## Welcome Jason Alston

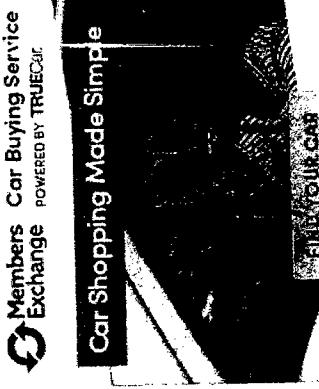
Description	Available	Balance
<u>S0001 SAVINGS</u>	\$0.00	\$1.00
<u>S0021 CHECKING</u>	\$0.00	\$0.00

Description	Due	Payment	Available	Balance
Unsecured Line Of Credit	07/31/19	\$125.00	(\$299.40)	\$2,299.40

2 Deposit accounts with a total balance of \$1.00  
 1 Loan account with a balance of \$2,299.40  
 0 Investment accounts

You last accessed your NetTeller account on Friday, July 12, 2019 at 12:57:54 PM CDT

You have accessed NetTeller 15 times(s) since Monday, May 8, 2017 at 09:24:36 AM CDT



SOCIAL SECURITY ADMINISTRATION

Date: July 12, 2019  
BNC#: 19BC255K33867  
REF: A ,DI

JASON D ALSTON  
223 3RD AVE  
KOSCIUSKO MS 39090-3121

You asked us for information from your record. The information that you requested is shown below. If you want anyone else to have this information, you may send them this letter.

Information About Current Social Security Benefits

Beginning December 2018, the full monthly Social Security benefit before any deductions is.....\$ 758.00

We deduct \$0.00 for medical insurance premiums each month.

The regular monthly Social Security payment is.....\$ 758.00  
(We must round down to the whole dollar.)

Social Security benefits for a given month are paid the following month. (For example, Social Security benefits for March are paid in April.)

Your Social Security benefits are paid on or about the third of each month.

Information About Supplemental Security Income Payments

Beginning January 2018, the current Supplemental Security Income payment is.....\$ 0.00

This is after we have withheld 33.00 to recover an overpayment.

This payment amount may change from month to month if income or living situation changes.

Supplemental Security Income Payments are paid the month they are due. (For example, Supplemental Security Income Payments for March are paid in March.)

Type of Social Security Benefit Information

You are entitled to monthly disability benefits.

Type of Supplemental Security Income Payment Information

You are entitled to monthly payments as a disabled individual.

SUSPECT SOCIAL SECURITY FRAUD?

Please visit <http://oig.ssa.gov/r> or call the Inspector General's Fraud Hotline at 1-800-269-0271 (TTY 1-866-501-2101).

IF YOU HAVE QUESTIONS

We invite you to visit our web site at [www.socialsecurity.gov](http://www.socialsecurity.gov) on the Internet to find general information about Social Security. If you have any specific questions, you may call us toll-free at 1-800-772-1213, or call your local office at 866-875-5995. We can answer most questions over the phone. If you are deaf or hard of hearing, you may call our TTY number, 1-800-325-0778. You can also write or visit any Social Security office. The office that serves your area is located at:

SOCIAL SECURITY  
80 VETERAN MEMORIAL DR  
KOSCIUSKO, MS 39090

If you do call or visit an office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly when you arrive at the office.



OFFICE MANAGER