

No. 19-5843

USCA9 CASE NO. 18-17263

IN THE
SUPREME COURT OF THE UNITED STATES

GONZALO R. RUBANG JR.

(Your Name)

PETITIONER

GALLAGHER BASSETT SERVICES, INC,

KATHLEEN GRUBER

VS.

— RESPONDENT(S)

FILED

AUG 22 2019

OFFICE OF THE CLERK
SUPREME COURT, U.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):

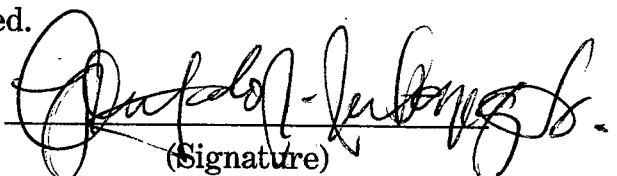
Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

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.


(Signature)

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

I, GONZALO R. RUBANG JR., 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>0</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>2,388</u>	\$ <u>0</u>	\$ <u>2,388</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>MOTHER CONTRIBUTIO</u>	\$ <u>950</u>	\$ <u>0</u>	\$ <u>950</u>	\$ <u>0</u>
<u>HER SOCIAL SECURITY MONTHLY BENEFITS</u>	\$ <u>3,338</u>	\$ <u>0</u>	\$ <u>3,338</u>	\$ <u>0</u>
Total monthly income:	\$ <u>3,338</u>		\$ <u>3,338</u>	

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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
NONE	NONE	NONE	\$ NONE
			\$
			\$
			\$

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
NONE	NONE	NONE	\$ NONE
			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 160

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
WELLS FARGO - CHECKING	\$ 160	\$ 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 500,000

Other real estate

Value NONE

Motor Vehicle #1

Year, make & model HYUNDAI ACCENT

** Value \$12,000

Motor Vehicle #2

Year, make & model HYUNDAI VELSTER

Value \$17,000

Other assets

Description NONE

Value 0

2016
HYUNDAI ACCENT
\$12,000
2017
HYUNDAI VELSTER
\$17,000
OWNERSHIP ON my NAME
BROTHER PAY MONTHLY PAYMENT

** "Stop making payment" since Nov'2018. Ongoing exchange court statements at USCA9, HYUNDAI MOTOR AMERICA and Counsel had lobbied and convinced the USDCEDCA - SACRAMENTO to deny my request to have "INDEPENDENT SERVICE CENTER" to conduct separate engine oil reading. As my 2016 HYUNDAI ACCENT engine oil reading gets very low when reach 1,000 miles. I have to add engine oil before it explode while I am driving and HYUNDAI MOTOR AMERICA and the USDCEDCA - SACRAMENTO can careless of our safety together with other motorist at the highways, immediately denied my request for "INDEPENDENT SERVICE CENTER" and dismissed the case. Ongoing case at USCA9 Case No. 19 - 16088.

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
<u>NONE</u>	\$ <u>X00E</u>	\$ <u>X00E</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>ANTONIA RUBANG</u>	<u>MOTHER</u>	<u>87</u>
_____	_____	_____
_____	_____	_____

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>1,700</u>	\$ <u>0</u>
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)	\$ <u>300</u>	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>0</u>
Food	\$ <u>250</u>	\$ <u>0</u>
Clothing	\$ <u>50</u>	\$ <u>0</u>
Laundry and dry-cleaning	\$ <u>50</u>	\$ <u>0</u>
Medical and dental expenses	\$ <u>100</u>	\$ <u>0</u>

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	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>50</u>	\$ <u>0</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>0</u>
Life	\$ <u>0</u>	\$ <u>0</u>
Health	\$ <u>120</u>	\$ <u>0</u>
Motor Vehicle AAA — —	\$ <u>320</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ <u>0</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>0</u>
Credit card(s)	\$ <u>0</u>	\$ <u>0</u>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: <u>GAS</u>	\$ <u>200</u>	\$ <u>0</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>STORAGE</u>	\$ <u>136</u>	\$ <u>0</u>
Total monthly expenses:	<u>\$ 3,276</u>	\$ <u>0</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.

Expecting disability retirement from my employer UNITED AIRLINES, INC. As soon as I get additional monthly income I am available to pay back all the court fees that I owed.

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? _____

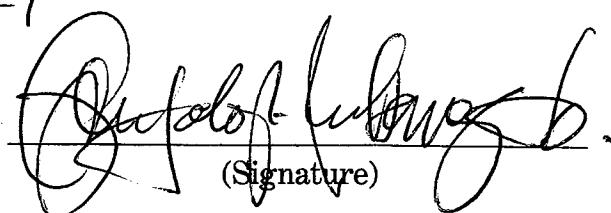
If yes, state the person's name, address, and telephone number:

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

I am a fixed income Social Security Disability recipient monthly benefits of \$2,388. Still ongoing US COURT of APPEALS for the NINTH CIRCUIT - SAN FRANCISCO court litigation Case No. 19 - 15934 " fraud " and " wrongful eviction " to me by US BANK TRUST, N. A. AS TRUSTEE FOR LSF8 MASTER PARTICIPATION TRUST, that as " trustee never exist ".

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

Executed on: 21 Ac18, 2019


(Signature)