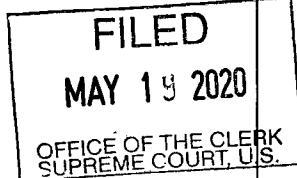


No. 19-8571

ORIGINAL

In the  
Supreme Court of the United States



**DERRICK MARTIN KING,**  
*Petitioner*

versus

**OHIO DEPARTMENT OF JOB AND FAMILY SERVICES**  
*Respondent*

*On Petition for a Writ of Certiorari to the  
Summit County (Ohio) Court of Appeals, Ninth Appellate District*

**PETITIONER'S MOTION FOR LEAVE TO PROCEED IN FORMA  
PAUPERIS**

Now comes your Petitioner **DERRICK MARTIN KING**, proceeding *pro se*, and he moves this Honorable Court for the entry of an Order which grants him leave to proceed in forma pauperis. The above styled cause is pursuant to Supreme Court Rule 39.

For the reasons set forth in the attached declaration, Petitioner prays the Court grant the relief requested herein.

Respectfully Submitted,

  
DERRICK MARTIN KING

1445 Crestview Avenue  
Akron, Ohio 44320-4049  
(330) 867-3979  
Email:  
dmking12370@hotmail.com

*Pro se Petitioner*

**DECLARATION IN SUPPORT OF PETITIONER'S MOTION TO  
PROCEED IN FORMA PAUPERIS**

Pursuant to 28 U.S.C. § 1746, Derrick Martin King declares and states as follows:

1. I am an adult over 18 years of age and competent to make the following declarations based upon my personal knowledge;
2. I am the Petitioner in the above captioned matter;
3. That in support of the Motion, I state that I am unable to pay the filing fees and other costs associated with this case due to my indigence;
4. I am unmarried and have no dependents;
5. I have the following income sources:

INCOME SOURCE	AVG MONTHLY AMOUNT	AMOUNT EXPECTED NEXT MONTH
Employment	\$0	\$0
Self-Employment	\$0	\$0
Income from Real Property	\$0	\$0
Interest and Dividends	\$0	\$0
Gifts	\$0	\$0
Alimony	\$0	\$0
Child Support	\$0	\$0
Retirement Benefits	\$0	\$0
Disability	\$0	\$0
Unemployment Benefits	\$0	\$0
SNAP Food Stamp Benefit	\$194	\$194
Other Benefits	\$0	\$0
<b>Total Monthly Income</b>	<b>\$194</b>	<b>\$194</b>

6. I have been unemployed for the past eleven (11) years;
7. I hold a checking account at Huntington National Bank with a current balance of \$19.56;
8. I do not own a home, motor vehicle, or any other assets;
9. There are no persons, businesses, or organizations that owe me money;
10. There are no persons that rely on me for support;
11. I have the following monthly expenses:

EXPENSE	AMOUNT
Rent/Home Mortgage Payment	\$0
Utilities	\$0
Home Maintenance	\$0
Food	\$194
Clothing	\$0
Laundry and Dry Cleaning	\$0
Medical and Dental Expenses	\$0
Transportation Expenses	\$0
Recreation	\$0
All Insurance Expenses	\$0
Taxes	\$0
Alimony/Support Paid to Others	\$0
Expenses Associated with Operation of Business	\$0
Other Expenses	\$0
<b>Total Monthly Expenses</b>	<b>\$194</b>

12. I do not expect any changes to my monthly income, expenses, assets, or liabilities during the next twelve (12) months;

13. I have not paid nor will I be paying an attorney money for services in connection with this case;

14. I have not paid nor will I be paying any person money for services in connection with this case; and

15. I have been granted leave to proceed in forma pauperis at the trial court level, before the Summit County Court of Appeals, Ninth Appellate District, and the Supreme Court of Ohio (a copy of the signed Orders are attached).

I declare under penalty of perjury that the statements contained herein are true and correct.

Executed on the 19th day of May, 2020 in the City of Akron, State of Ohio, United States of America.

  
DERRICK MARTIN KING

**PROOF OF SERVICE**

Petitioner DERRICK MARTIN KING hereby declares that on this date, May 12, 2020, I have served the enclosed *Motion for Leave to Proceed In Forma Pauperis* upon each party to the above captioned matter or that party's counsel by electronic mail service to the following persons:

Theresa Rose Dirisamer ([Theresa.Dirisamer@ohioattorneygeneral.gov](mailto:Theresa.Dirisamer@ohioattorneygeneral.gov))  
*Counsel for Respondent Ohio Department of Job and Family Services*

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

Executed on May 19, 2020 at Akron, Ohio.

  
DERRICK MARTIN KING

SANDRA KURT  
IN THE COURT OF COMMON PLEAS  
COUNTY OF SUMMIT 2017 09 3744  
2017 SEPT 14 PM 1:43 2017 09 3744

DERRICK MARTIN KING ) SUMMIT CASE NO. CV \_\_\_\_\_

) CLERK OF COURTS

Plaintiff )

-vs-

OHIO DEPT OF JOB &  
FAMILY SERVICES

) JUDGE Wells

Defendant )

**POVERTY AFFIDAVIT**

Now comes, DERRICK MARTIN KING Affiant, in the above case, after being duly sworn, says that:

1. I am financially unable to make a cash deposit or filing fee in this action and that my financial inability to make such cash deposit is due to:

UNEMPLOYMENT

2. I further state that in the last 12 months, I have worked for the following (names and addresses required): (If unemployed at this time, state "UNEMPLOYED.")

UNEMPLOYED

3. I further state that I have received past public assistance in the previous twelve (12) months from: (If none, state "NONE.")

DISABILITY FINANCIAL ASSISTANCE

\$ 115.00 PER MONTH

SNAP BENEFITS \$ 194.00 PER MONTH

4. I further state that I have bank balances (savings accounts, CD's, checking accounts and/or IRA and stocks or bonds) as set forth below: (State the entity, type of account maintained and the approximate balance.)

CHECKING ACCOUNT HUNTINGTON  
BANK (\$28.96)

5. The number and ages of dependents residing with me, and for whom I am responsible:

NO DEPENDANTS

6. I own the following real estate (even if there is a lien):

NO REAL ESTATE

7. I own the following motor vehicles (even if there is a lien):

NO MOTOR VEHICLES

8. I further understand that this Poverty Affidavit only waives filing fees as required by the court in this matter, and that, upon the conclusion of this matter, I may be responsible for paying any court costs.

9. I also understand that if I provide any false information in this Poverty Affidavit, I may be found in contempt of court, and/or a criminal action may be initiated for falsifying this document.

NOTE: USE THE REVERSE SIDE OF THESE PAGES, IF ADDITIONAL ROOM IS REQUIRED.

09/08/2017

Date

1445 Crestview Ave

Akron OH 44320

330-867-3979

Address/Phone Number of Affiant

Derrick M. King  
Signature of Affiant

Derrick M. King  
Print Name of Affiant

01/23/1970

Date of Birth of Affiant

On 8 day of September, 20017, in Akron, Summit County, State of Ohio, before me appeared the said Derrick M. King who, first being duly sworn, said the above information is accurate and truthful to the best of the Affiant's knowledge and belief.



**Kylie B. Smith**  
Notary Public, State of Ohio  
My Commission Expires  
April 07, 2021

**NOTARY PUBLIC / DEPUTY CLERK**

I, Attorney Michael Altavater, as an officer of the court, hereby certify that the above Affiant has paid no attorney's fees to me in this matter, or has caused others to pay attorney's fees on his/her behalf in this matter, nor have I received any other item of value in this matter for either me and/or my firm to serve as counsel for this party.

9/8/17  
Date

Signature of Attorney

Michael Altman

**Print Name of Attorney**

209 S. High St. Akron, OH 44308

330-043-2278

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**Address/Phone Number of Attorney**

0084389

**Bar Number of Attorney**

This Affidavit was reviewed by Magistrate Michael Altman on the  
8 day of Sept., 2017 and is approved not approved for  
filing with the Clerk. (Circle which one)

If not approved, the Court orders a hearing on this matter shall be held on

, 200 at a.m./p.m.

# In the Supreme Court of Ohio

## Affidavit of Indigence

I, **DERRICK MARTIN KING**, do hereby state that I am without the necessary funds to pay the costs of this action for the following reason(s):

1. I am currently unemployed and have no income;
2. I am currently receiving Medicaid and SNAP benefits; and
3. I am without funds to pay for the filing fees associated with this case.

Pursuant to Rule 3.06, of the Rules of Practice of the Supreme Court of Ohio, I am requesting that the filing fee and security deposit, if applicable, be waived.

Derrick M. King  
**DERRICK MARTIN KING**

Sworn to, or affirmed, and subscribed in my presence this  
19<sup>th</sup> day of June, 2018.

  
Notary Public  
My Commission Expires: April 10<sup>th</sup> 2022



John D. Campbell  
Notary Public, State of Ohio  
My Commission Expires  
April 10, 2022



# In the Supreme Court of Ohio

## AFFIDAVIT OF INDIGENCY

I, Derrick Martin King, do hereby state that I am without the necessary funds to pay the cost of this action due to the following reasons:

- I am currently unemployed.
- I am currently receiving SNAP benefits.
- I am currently receiving Medicaid benefits.

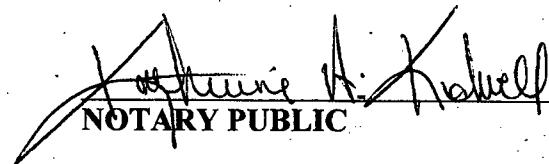
Pursuant to Rule 15.3 of the Rules of Practice of the Supreme Court of Ohio and for the reasons stated above, I am requesting that the filing fee and the security deposit (if applicable) be waived.

  
**DERRICK MARTIN KING**  
Affiant

Sworn to (or affirmed) and subscribed in my presence this 25 day of July, 2019.



**KATHERINE A. KIDWELL**  
Notary Public, State of Ohio  
My Commission Expires  
December 09, 2023

  
**NOTARY PUBLIC**

*My Commission Expires 12/09/2023*