

19-8622

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

KIMBERLEY A. MCQUEARY-LAYNE PETITIONER
(Your Name)

VS.

LOUISIANA STATE BOARD — RESPONDENT(S)
OF NURSING, ET AL.

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):
19th JDC [EAST BATON ROUGE], CIRCUIT COURT [BATON ROUGE]
US MIDDLE DISTRICT OF LOUISIANA, UNITED STATES COURT OF
APPEALS - FIFTH CIRCUIT
[BATON ROUGE]

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.

RECEIVED

JUN - 5 2020

OFFICE OF THE CLERK
SUPREME COURT, U.S.

Kimberley McQueary-Layne
(Signature)

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

I, KIMBERLEY A. MCGOWAN, 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>TOTAL AGI - 2019</u>	<u>YEARLY</u> <u>\$ 18,350</u>	\$ _____	\$ _____
Self-employment	\$ _____	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ _____	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ _____	\$ _____	\$ _____	\$ _____
Gifts	\$ _____	\$ _____	\$ _____	\$ _____
Alimony	\$ _____	\$ _____	\$ _____	\$ _____
Child Support *	\$ _____	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ _____	\$ _____	\$ _____	\$ _____
Disability (such as social security, insurance payments)	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ _____	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ _____	\$ _____	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ _____	\$ _____	\$ _____	\$ _____
*HAS VARIED OVER 2019, DUE TO SPORADIC EMPLOYMENT AT LABOR POOL - DAILY LABOR				

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
PEOPLE READY	NAPLES - NATIONWIDE	2017 - CURRENT	\$ 700.00 ?
SUPERIOR STAFFING	NAPLES	2017 - 2019	\$? VARIES
MOUKA'S BISTRO	NAPLES	2019	\$ 400.00

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.)

Employer	Address	Dates of Employment	Gross monthly pay
			\$
			\$
			\$

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
* NO BANK ACCOUNT - CLOSED	\$ 50.00	\$
DUE TO OVERDRAFT FEES - TD BANK	\$ CASH	\$

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 2004 MITSUBISHI
 Value \$ 500

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

Other assets
 Description _____
 Value _____ N/A

NO ASSETS - NOTHING!

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

\$ _____
\$ _____
\$ _____
\$ _____

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

MICAH MCLOUTARY

Relationship

SON

Age

18

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>STAYING & WITH FRIENDS</u> \$ <u>0</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 <u>telephone</u>)	\$ <u>40</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ _____
<u>Food</u>	\$ <u>50</u>	\$ _____
Clothing	\$ <u>0</u>	\$ _____
<u>Laundry and dry-cleaning</u>	\$ <u>40 00</u>	\$ _____
Medical and dental expenses	<u>INSURANCE MONTHLY</u> \$ <u>125</u>	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 100 gas	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ _____
Life	\$ 21	\$ _____
Health	\$ 125	\$ _____
Motor Vehicle	\$ 120	\$ _____
Other: _____	\$ 0	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$ _____
Installment payments		
Motor Vehicle	\$ 0	\$ _____
Credit card(s) <i>total debt</i> —	\$ 580	\$ _____
Department store(s)	\$ 0	\$ _____
Other: <u>STUDENT LOAN</u> 100K \$ * (<u>GRADUATION DEFERRED</u>)	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ 0	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ _____
Other (specify): _____	\$ 0	\$ _____
Total monthly expenses:	\$ 866	\$ _____

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.

*HOPINGLY A REAL JOB SO I CAN PAY DEBTS.
"BLACKLISTED" IN NURSING DUE TO THIS MATER.*

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 HAVE BEEN MADE INDIGENT, AS A SINGLE MOM,
THAT SUPPORTED 7 CHILDREN, ON HER OWN, BY AN UNJUST
LEGAL SYSTEM AND CORRUPT STATE OF LOUISIANA.*

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

Executed on: 5.26.20, 2020

Kimberly A. McGuire - Jr
(Signature)