No
IN THE
SUPREME COURT OF THE UNITED STATES
Dr. Lakshmi Arunachalam, a Woman — PETITIONER  (Your Name)
Apple VS. <del>Intuit</del> , Inc. et al 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.
Please check the appropriate boxes:
Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):  Cases 19-1794 (Fed. Cir); 4:13-CV-01248-PJH (ND Ca)  Case 19-1232 (D.C. Circuit)
Petitioner has <b>not</b> 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 <b>not</b> 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.
Labolini Ammachelano (Signature)
(Signature)

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

I, Dr. Lakshmi Arunacha am, a Wernan 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.

	Average monthly ame the past 12 months	ount during	Amount expe next month	cted
	You	Spouse	You	Spouse
Employment	\$	\$	\$0	\$
Self-employment	\$	\$	\$	\$
Income from real proper (such as rental income		\$	\$ <i>O</i>	\$
Interest and dividends	\$ <i>0</i>	\$	\$	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$0	\$
Child Support	\$	\$	\$O	\$
Retirement (such as so security, pensions, annuities, insurance)	ocial \$ <u>1487</u>	\$	\$ 1483	\$
Disability (such as soci security, insurance pa		\$	\$ <i>O</i>	\$
Unemployment paymer	nts \$ <u> </u>	\$	\$ <i>O</i>	\$
Public-assistance (such as welfare)	\$	\$	\$ <i>O</i>	\$
Other (specify):	\$0	\$	\$ <u>0</u>	\$
Total monthly in	ncome: \$ 1481	\$	\$ 1483	\$

Employer 	Address	Dates of Employment	Gross monthly pay
			\$ \$
3. List your spouse's (Gross monthly pa	s employment history ay is before taxes or	athan dadaationa)	s, most recent employer f gle, no spous Gross monthly pay
Employer	Address	Dates of	Gross monthly pay
M/A		Employment	\$
institution.  Type of account (e.g.	checking or saving	s) Amount vou have	Amount your spouse h
institution.  Type of account (e.g.	checking or saving	s) Amount vou have	Amount vour spouse h
institution.  Type of account (e.g.  Checount  Solve  5. List the assets, a	, checking or saving King	s) Amount you have  \$ 75  \$ 25  \$	Amount vour spouse h
institution.  Type of account (e.g. she	nd their values, whi	s) Amount you have  \$ 75  \$ 25  \$	Amount your spouse has \$
institution.  Type of account (e.g. she	nd their values, whisehold furnishings.	s) Amount you have \$ 15 \$ 25 \$ ich you own or your spous	Amount your spouse has \$ \$ \$ \$ se owns. Do not list clothate
institution.  Type of account (e.g. Checount (e.g.	nd their values, whisehold furnishings.	s) Amount you have \$ 15 \$ 25 \$ ich you own or your spous  Uther real estate Value	Amount your spouse has \$ssssss e owns. Do not list clothate
institution.  Type of account (e.g. Checount (e.g.	nd their values, whisehold furnishings.	s) Amount you have \$ 15 \$ 25 \$ ich you own or your spous  Uther real estate Value	Amount your spouse has \$

6. State every person, busines amount owed.	s, or organization ow	ing you o	or your	spouse money, and the
Person owing you or your spouse money	Amount owed to you	ì	Amount	t owed to your spouse
George Pazuniak	\$ TBD		\$	NA
All Defendants in all of my cases	\$ TBD \$		\$ \$	
7. State the persons who rely or instead of names (e.g. "J.S." i		").	2	inor children, list initials
Name ———————	Relationship	~/ <i>\$</i>		Age
8. Estimate the average monthly paid by your spouse. Adjust annually to show the monthly	st any payments that	are made	weekly,	separately the amounts biweekly, quarterly, or Spewse Your spouse
Rent or home-mortgage paymer (include lot rented for mobile ho Are real estate taxes included? Is property insurance included	ome) P	\$	0	* N/A
Utilities (electricity, heating fue water, sewer, and telephone)	l,	\$	150	\$N/A
Home maintenance (repairs and	upkeep)	\$	0	\$N/A
Food		\$j	75	\$N/A
Clothing		\$	0	* N/A
Laundry and dry-cleaning		\$	0	\$ N/A
Medical and dental expenses		\$	L50_	\$N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 74	\$_N/K
Recreation, entertainment, newspapers, magazines, etc.	\$	\$_N/A_
Insurance (not deducted from wages or included in mortg	age payments)	
Homeowner's or renter's	\$	\$ N/A
Life	\$0	\$ N/A
Health	\$ 236	\$_N/A
Motor Vehicle	\$	\$ N/A
Other:	\$ <i>O</i>	\$ N/A
Taxes (not deducted from wages or included in mortgage	payments)	
(specify):	\$	\$ N/A
Installment payments		
Motor Vehicle	\$	\$ N/A
Credit card(s)	\$ 548	\$ N/A
Department store(s)	\$	s N/A
Other:	\$ <i>O</i>	\$ N/A
Alimony, maintenance, and support paid to others	\$	s_N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$ N/A
Other (specify):	\$O_	* N/A
Total monthly expenses:	s 1483	* N/A

9.			next 12 months?		income or exp	enses or in your as	sets or
	☐ Yes	No	If yes, describ	e on an attac	hed sheet.		
άń	Uava vait	oid on m	uill was be assisted				
10.			ling the completion			or services in conn ⊠No	ection
	If yes, how	much?	——————————————————————————————————————				
	If yes, state	e the atto	rney's name, add	ress, and tele	phone number:		
11.	a typist) an form?	y money i	for services in co	—anyone oth nnection with	er than an atto this case, incl	rney (such as a par uding the completion	alegal or on of this
		No					
	If yes, how	much?					
If y	es, state the	e person's	name, address, a	and telephone	number:		
					•		
19	Dravida an	r athan in t	Commontion that suit	11 111-:		-1 17 1 C	41.:
14.	1 Tovide any	y other im	ormation that wi	n neip explai	n wny you cann	ot pay the costs of	this case.
I d	eclare under	penalty o	of perjury that th	ne foregoing i XX	s true and corr	ect.	
Ex	ecuted on: _	A Con	June 5, 2020	Service	o e is atta	chea.	
		n ver	4		Cakshini	ched. Dunacha	lam
						(Signature)	