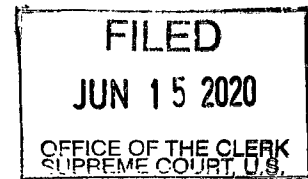


ORIGINAL

No. 20-5255



IN THE
SUPREME COURT OF THE UNITED STATES

DON MASHAK - Petitioner

VS.

COMMISSIONER OF INTERNAL REVENUE
Respondent

WRIT OF CERTIORARI

FROM UNITED STATES COURT OF APPEALS FOR THE EIGHT CIRCUIT

Case No. 19-1429

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:

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

Minnesota US District Court, US 8th Appellate Court


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

XXX Petitioner's affidavit or declaration in support of this motion is attached hereto.

D Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

D The appointment was made under the following provision of law:

D a copy of the order of appointment is appended.

, or

(signature)

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

I, Don Mashak, 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	\$10	\$	\$15	\$
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)	\$783	\$	\$783	\$
Unemployment payments	\$	\$	\$	\$
Public-assistance (such as welfare)	\$160	\$	\$160	\$
Other (specify):	\$	\$	\$	\$
Total monthly income:	\$953	\$	\$958	\$

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
FNR, Inc	POB 231 AlbertvilleMN	1988 -2018	\$ 0
Self			\$
			\$

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
n/a			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 275
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
US Direct Express	Debit	\$ 400	\$n/a
		\$	\$
		\$	\$

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

D Home
Value 300,000 in foreclos

D Other real estate
Value _____

D Motor Vehicle #1
Year, make & model 2004 Olds Alero
Value 300

D Motor Vehicle #2
Year, make & model _____
Value _____

D Other assets
Description _____
Value _____

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
n/a _____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

Name	Relationship	Age
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.

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 1800 in foreclosur	\$ _____
Are real estate taxes included? D Yes XX No		
Is property insurance included? D Yes XX No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 150	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ 160	\$ _____
Clothing	\$ 75	\$ _____
Laundry and dry-cleaning	\$ 15	\$ _____
Medical and dental expenses	\$ 25	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>250</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>75</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ <u>50</u>	\$ _____
Health	\$ <u>Medica</u>	\$ _____
Motor Vehicle	\$ <u>55</u>	\$ _____
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>260</u>	\$ _____
Installment payments		
Motor Vehicle	\$ <u>n/a</u>	\$ _____
Credit card(s)	\$ _____	\$ _____
Department store(s)	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>n/a</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____
Total monthly expenses:	\$ <u>1115</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.

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? _____

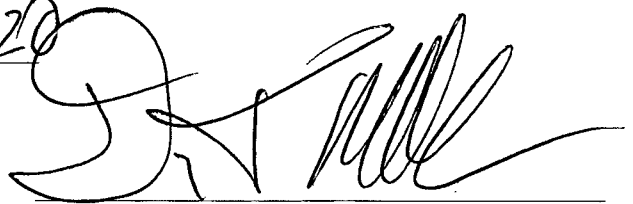
If yes, state the person's name, address, and telephone number:

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

I am a victim of unlawful retaliation and punishment for exercising my Natural Right to Petition the government for redress of grievances without fear of reprisal as reduced to writing in the First Amendment. I am on disability for health issues caused by the stress of dealing with this Conspiracy Against Rights and other Unconstitutional Acts, and Wide-Spread Corruption, Sedition and Treason in our Government and Courts by the Progressive Globalist Insurgency.

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

Executed on: JUN 15, 2020



Don Mashak, In Propia Persona
And as a citizen of the organic
United States of America