

20-7013

No. _____

ORIGINAL

Supreme Court, U.S.
FILED

JAN 21 2021

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

WILLIAM M. WINDSOR — PETITIONER
(Your Name)

VS.

KELLIE MCDONALD — RESPONDENT(S)

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The petitioner asks leave to file the attached petition for a writ of ~~certiorari~~ *MANDAMUS* without prepayment of costs and to proceed *in forma pauperis*. *was*

Please check the appropriate boxes:

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

TEXAS TENTH COURT OF APPEALS

TEXAS SUPREME COURT

U.S. SUPREME COURT 20-6877

☐ 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.

William M. Windsor

(Signature)

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

I, William M. Windsor, 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	\$ 0	\$ 0	\$ 0	\$ 0
Self-employment	\$ 0	\$ 0	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 0
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement (such as social security, pensions, annuities, insurance)	\$ 2228	\$ 0	\$ 2228	\$ 0
Disability (such as social security, insurance payments)	\$ 0	\$ 0	\$ 0	\$ 0
Unemployment payments	\$ 0	\$ 0	\$ 0	\$ 0
Public-assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0
Other (specify):	\$ 0	\$ 0	\$ 0	\$ 0
Total monthly income:	\$ 2228	\$ 0	\$ 2228	\$ 0

* DIVORCED June 12, 2013

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
N/A	N/A	N/A	\$ 0
N/A	N/A	N/A	\$ 0
N/A	N/A	N/A	\$ 0

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
NO SPOUSE	N/A	N/A	\$ 0
N/A	N/A	N/A	\$ 0
N/A	N/A	N/A	\$ 0

4. How much cash do you and your spouse have? \$ 80.

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	\$ 13,333.	\$ 0
	\$ 0	\$ 0
	\$ 0	\$ 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 60,000

☐ Other real estate
Value 0

☒ Motor Vehicle #1
Year, make & model 2017 JEEP CHEROKEE
Value 1,000.

☐ Motor Vehicle #2
Year, make & model NONE
Value 0

☐ Other assets
Description
Value 0

6. State every person, business, or organization owing you ~~or your spouse~~ money, and the amount owed. *none*

Person owing you or your spouse money

Amount owed to you

Amount owed to your spouse

NONE

\$ 0

\$ 0

NONE

\$ 0

\$ 0

NONE

\$ 0

\$ 0

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"). *none*

Name

Relationship

Age

NONE

N/A

N/A

NONE

N/A

N/A

NONE

N/A

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~~ *none*

Rent or home-mortgage payment
(include lot rented for mobile home)

\$ 650

\$ 0

Are real estate taxes included? ☒ Yes ☐ No

Is property insurance included? ☐ Yes ☒ No

Utilities (electricity, heating fuel,
water, sewer, and telephone)

\$ 300

\$ 0

Home maintenance (repairs and upkeep)

\$ 50

\$ 0

Food

\$ 600

\$ 0

Clothing

\$ 50

\$ 0

Laundry and dry-cleaning

\$ 25

\$ 0

Medical and dental expenses

\$ 350

\$ 0

	You	Your spouse <i>none</i>
Transportation (not including motor vehicle payments)	\$ <u>100</u>	\$ <u>0</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</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>0</u>	\$ <u>0</u>
Motor Vehicle	\$ <u>100</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>350</u>	\$ <u>0</u>
Credit card(s)	\$ <u>77,424.</u>	\$ <u>0</u>
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: _____	\$ <u>0</u>	\$ <u>0</u>

Alimony, maintenance, and support paid to others

\$ <u>0</u>	\$ <u>0</u>
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Regular expenses for operation of business, profession, or farm (attach detailed statement)

\$ <u>0</u>	\$ <u>0</u>
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Other (specify): SEE BELOW

\$ <u>1300.</u>	\$ <u>0</u>
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Total monthly expenses:

\$ <u>83,527.</u>	\$ <u>0</u>
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INTERVIEW \$200
 PRESCRIPTIONS \$200
 TOILETRIES, ETC. \$200

LEGAL \$500
 MISC. \$200

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? 0

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

N/A

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? 0

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

N/A

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

I HAVE DEBT OF OVER \$1,500,000 IN CREDIT CARD DEBT (18 MONTHS PAST DUE), ACCOUNTS AND NOTES PAYABLE, COURT JUDGMENTS AND MEDICAL BILLS. SEE ATTACHED.

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

Executed on: JANUARY 15, 2021

William M. Anderson

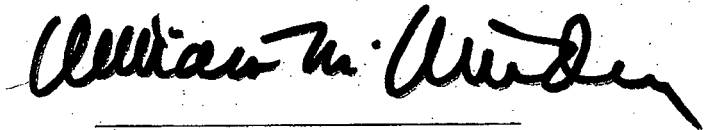
(Signature)

VERIFICATION

Personally appeared before me, the undersigned Notary Public duly authorized to administer oaths, William M. Windsor, who after being duly sworn deposes and states that he is authorized to make this verification and that the facts alleged in the foregoing are true and correct based upon his personal knowledge, except as to the matters herein stated to be alleged on information and belief, and that as to those matters he believes them to be true.

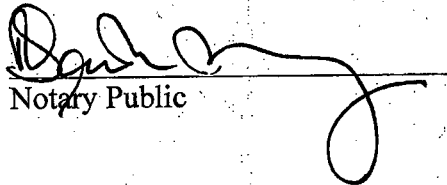
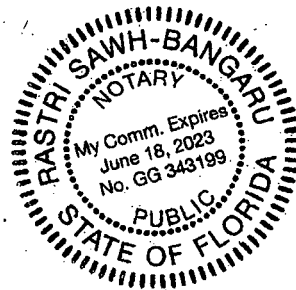
I declare under penalty of perjury that the foregoing is true and correct based upon my personal knowledge.

This 15th day of January, 2021,



William M. Windsor

Sworn and subscribed before me this 15th day of January, 2021, by means of physical presence.


Notary Public

William M. Windsor - Debts

Admin Recovery, LLC	6225 Sheridan Drive Suite 118		Williamsville	NY	14221	866-703-7961		6006101016101930	Samsung collection	\$411.95	8/1/2019
Ally Financial	PO Box 389901		Bloomington	MN	55438	888-925-2559		35457	Jeep	\$15,696.22	7/16/2019
American Express	PO Box 981537		El Paso	TX	79998	800-874-2717		3728 178403 32008	credit card	\$0.00	8/11/2019
American Integrity Insurance	MSC #504	PO Box 830469	Birmingham	AL	35283-0469	866-968-8390		AGC0136928	insurance - canceled	\$892.00	2018
Bank of America	MasterCard	PO Box 982238	El Paso	TX	79998	800-421-2110		5524 3325 1682 4201	credit card	\$43,555.79	9/23/2019
Belk	Synchrony Bank Law Offices of Charles G. McCarthy	PO Box 965027	Orlando	FL	32896-5027	855-752-8046		5243 0010 0464 3684	credit card	\$1,308.97	8/10/2019
Central Florida Anesthesia	PO Box 1045		Bloomington	IL	61702	309-828-7000		69134	medical	\$46.06	
Central Florida Total Health Care	Dr. Jose Lopez	30 Remington Road - Suite 2	Oakland	FL	34787-9797	407-392-1919		5679908	medical	\$61.33	
Chase Bank	Amazon Prime	PO Box 1423	Charlotte	NC	28201-1423	888-247-4080		4147 4001 5895 6142	credit card	\$3,571.06	9/11/2019
Chase Bank	IHG Rewards Club	PO Box 1423	Charlotte	NC	28201-1423	800-698-0120		5466 0420 2703 6662	credit card	\$11,141.85	9/9/2019
Collection Bureau, Inc.	Primary Health Medical Group	PO Box 1219	Nampa	ID	83653-1219	888-432-2432		00848900	collection agency	\$11.93	
Discover	PO Box 30421		Salt Lake City	UT	84130-0421	800-347-3085		6011 2088 4134 0261	credit card	\$7,151.04	9/6/2019
Diversified Consultants, Inc.	Verizon Wireless	PO Box 551268	Jacksonville	FL	32255-1268	877-848-1045		04885310550001	collection agency	\$299.81	
Dr. Allen Newman	301 Skyline Drive #1		Lady Lake	FL	32159	352-753-9922			medical for traffic accident		
Dr. Jose Lopez	Central Florida Total Health Care	30 Remington Road, Suite 2	Oakland	FL	34787-9797	407-392-1919			medical		
LRUC Urgent Care in Mount Dora	8404 US Hwy 441		Mount Dora	FL		352-385-4405			medical for traffic accident		
Dr. Eduardo Parra Davila	Celebration Center for Surgery	410 Celebration Place, Suite 302	Celebration	FL	34747	407-303-3824			medical for traffic accident		
Radiology Specialists of Florida	PO Box 864551		Orlando	FL	32886-4552	866-481-7571			medical for traffic accident		
Clermont Radiology	871 Oakley Sever Drive		Clermont	FL	34711	352-241-6100	Info@clermontradiology.com		medical for traffic accident		
Dr. Sumanth Padmanabh	Arbor Medical Group	3900 Lake Center Dr, Suite A1	Mt. Dora	FL	32757				medical for traffic accident		
CMF	1922 Salk Avenue		Tavares	FL	32778				medical for traffic accident		
Florida Hospital Orlando	601 E Rollins St		Orlando	FL	32803				medical for traffic accident		
CareFirst Imaging	1714 SW 17th St Suite 300		Ocala	FL	34474	833-682-7818			medical for traffic accident		
Dr. Owen Fraser	1805 W Colonial Drive #A		Orlando	FL		407-578-9142			medical for traffic accident		
Dr. Jason Gerbec	1210 Waterman Way		Tavares	FL	32778	352-343-2364			medical for traffic accident		
Hohman Rehab	235 Mohawk Road		Clermont	FL	34715	855-404-6908			medical for traffic accident		
Dr. Dante V. Nuzzo	4700 That Street		Leesburg	FL	34748-9723	352-569-7152		617	medical	\$12.89	
Dr. Johnny Gugen	922 Rolling Acres Rd #205		Lady Lake	FL	32159	352-633-7930			dermatologist	\$131.20	8/21/2019
Dr. Jonathan Glass	Dartmouth Hitchcock Medical Center	1 Medical Center Drive	Lebanon	NH	03756-1000	603-650-7328			medical	\$0.00	2016
Dr. Lewis J Herzbun	PO Box 1507		Eustis	FL	32757-1507	352-357-7342		WINW1000	medical	\$56.86	