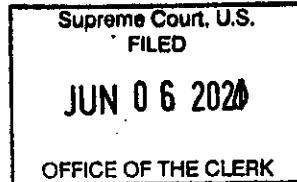


20-8104

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES



RICHARD LEO OCCHINO — PETITIONER
(Your Name)

VS.

GEO. SHERMAN AND
ASSOC. 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):

U.S. DISTRICT COURT IN MINNESOTA AND THE U.S. COURT
OF APPEALS IN ST. LOUIS, MO. THEY DENIED ME ATTORNEY TO HELP ME
WITH MY ALLEGED FRAUD CASE, UNCONSTITUTIONAL DONE BY MINNESOTA

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.
MY AFFIDAVIT OR DECLARATION IS ENCLOSED TO THE U.S. SUPREME COURT.

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.

I AM AT THIS TIME
SO ACC THE I HATE THAT
CAN BE RESTORED ON
A HUMAN BEING
DISAGREE AGREE, OR NOT

Richard L. Occhino
(Signature)

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

I, Richard Lee Cochran, 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>N.A.</u>	\$ _____	\$ _____	\$ _____
Self-employment	\$ <u>N.A.</u>	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ <u>N.A.</u>	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ <u>N.A.</u>	\$ _____	\$ _____	\$ _____
Gifts	\$ <u>N.A.</u>	\$ _____	\$ _____	\$ _____
Alimony	\$ <u>N.A.</u>	\$ _____	\$ _____	\$ _____
Child Support	\$ <u>N.A.</u>	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>N.A.</u>	\$ _____	\$ _____	\$ _____
Disability (such as social security, insurance payments)	\$ <u>804.00</u> <small>MONTH</small>	\$ <u>CANNOT MANAGE</u>	\$ <u>804.00</u>	\$ <u>CANNOT MANAGE</u>
Unemployment payments	\$ _____	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ _____	\$ _____	\$ _____	\$ _____
Other (specify): <u>EBT Food Stamps ACARD</u>	\$ <u>ABOUT \$16.00 AMO. OR SO. BUT MORE SINCE SOCIAL SECURITY END OF NOV \$40.00 LATER</u>	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ <u>820.00</u> <small>MONTH</small> FOR SOME Buy Food EBT FOR COURT 19 STARTED REC- EING ABOUT A MONTH AND A HALF AGO I did NOT EXPECT IT	\$ _____	\$ _____	\$ _____

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
V.A.			\$
V.A.			\$
V.A.			\$

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
NOT MARRIED NOLE			\$
			\$
			\$

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
	\$	\$
	\$	\$
	\$	\$

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

Home
Value _____

Other real estate
Value _____

Motor Vehicle #1
Year, make & model _____
Value _____

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

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
<u>NOLE</u>	\$ <u>NOLE</u>	\$ <u>NOLE</u>
<u> </u>	\$ <u> </u>	\$ <u> </u>
<u> </u>	\$ <u> </u>	\$ <u> </u>

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	Relationship	Age
<u>NOLE</u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

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.

<u>I OWE PAY \$500.00 A MONTHLY RENT AND 20.00 FOR STORAGE OF MY PROPERTY WHICH IS LEFT OF IT AFTER THE HOME EXPOSURE</u>	<u>You</u>	<u>Your spouse</u>
<u>Rent or home-mortgage payment (include lot rented for mobile home)</u>	<u>ABOUT \$500</u>	<u>ABOUT \$400.00</u>
<u>Are real estate taxes included?</u>	<u><input type="checkbox"/> Yes</u>	<u><input type="checkbox"/> No</u>
<u>Is property insurance included?</u>	<u><input type="checkbox"/> Yes</u>	<u><input type="checkbox"/> No</u>

Utilities (electricity, heating fuel, water, sewer, and telephone) \$ NOLE \$ NA

Home maintenance (repairs and upkeep) \$ NOLE \$ NA

Food \$ 460.00 LESS 10% AMO. \$ NA

Clothing \$ 400.00 LESS 10% AMO. \$ NA

Laundry and dry-cleaning \$ ABOUT \$30.00 EACH MO. \$ NA

Medical and dental expenses \$ 25.00 EACH MO. \$ NA

ABOUT \$5.00
EACH 3 MOS
BY DR. KNOWS
IBUY TO PAY
MEAS. FROM
ST LOUIS MO
A 90 DAY
S POLYCLINIC
CHEAPER

	You	Your spouse
Transportation (not including motor vehicle payments)	<i>I HAVE A CAR SINCE 1976 & DON'T \$ NONE</i>	\$ <i>N/A</i>
Recreation, entertainment, newspapers, magazines, etc.	\$ <i>REALLY ALMOST \$ 0. DOLLARS</i>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <i>N/A</i>	\$ <i>N/A</i>
Life	\$ <i>N/A</i>	\$ <i>N/A</i>
Health	\$ <i>N/A</i>	\$ <i>N/A</i>
Motor Vehicle	\$ <i>N/A</i>	\$ <i>N/A</i>
Other: _____	\$ <i>N/A</i>	\$ <i>N/A</i> <i>FAIR OR MATERIAL</i>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <i>RECEIVED A LOT OF MONEY FROM SAVINGS BENEFT. FROM SOCIAL SECURITY</i>	\$ <i>NONE</i>	\$ <i>0.00</i>
Installment payments		
Motor Vehicle	\$ <i>N/A</i>	\$ <i>NONE</i>
Credit card(s)	\$ <i>N/A</i>	\$ _____
Department store(s)	\$ <i>N/A</i>	\$ _____
Other: _____	\$ <i>N/A</i>	\$ _____
Alimony, maintenance, and support paid to others	\$ <i>N/A</i>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <i>N/A</i>	\$ _____
Other (specify): <i>ESPECIALLY ON MYSELF WHEN I CAN AFFORD.</i>	\$ <i>400.00 200.00 A MONTH</i>	\$ _____
Total monthly expenses:	\$ <i>200.00 A MONTH OR SOMETHING OR LESS EITHER WAY I DON'T SPEND NECESSARILY I CAN'T AFFORD TO IN THESE TIMES</i>	\$ _____

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.

ABOUT A \$7000 OR 50% INCREASE (7 DOLLAR)
PER MONTH IN SOCIAL SECURITY BENEFITS
A MONTH

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? Nothing

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

I DO NOT HAVE A ATTORNEY TO HELP ME, BUT I WISH
did I call or afford one but I am hoping that
YOUR HIGH COURT HELPS ME AND SEEKS AND REACHES
THAT I HAVE SEE A GRERANCE OF MY HOME MY SEC. & BOUTCHEN
WE PROBABLY HAVE TO SELL IT

11. Have you paid—or will you be paying—anyone other than an attorney (such as a paralegal or ~~18~~ a typist) any money for services in connection with this case, including the completion of this ~~18~~ ¹⁴ form?

Yes No I HAVE NO ONE TO HELP ME AND I
CANNOT AFFORD THEM.

If yes, how much? nothing

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

NO ONE BUT I WISH I COULD AFFORD
A ATTORNEY. BUT I ONLY RECEIVE \$200.00 A MONTH AND A SOCIAL SECURITY CHECK ABOUT \$6.00 A DAY FOR FOOD & MEDICAL EXPENSES BECAUSE
I DON'T HAVE ANYTHING ELSE. I WILL DO ANYTHING I CAN TO PAY MY BILLS.

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

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

Executed on: June 7th, 2020, 2020

ACCOLADES FOR HER
CHARACTER THE
TEAM

Richard L. Oehlmann
(Signature)

(Signature)

PEOPLE WHO ARE POOR
AND HAVE LITTLE OR NO MONEY
MONEY AND EASY PRESTO
MONEY AND LITTLE OR POOR
THEY ARE LUCKY TO BE WHOLESOME