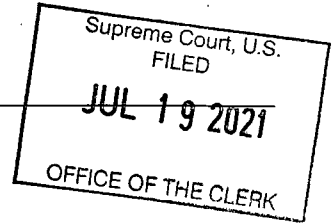


21-5167

Case No. 20-\_\_\_\_\_

**ORIGINAL**

SUPREME COURT OF UNITED STATES



The Bishop Ruben DeWayne,

*Petitioner/Plaintiff,*

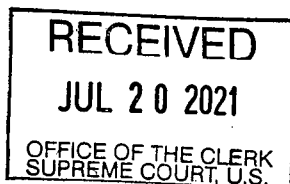
vs.

J.P. MORGAN MORTGAGE ACQUISITION CORP., et al.,

*Respondents/Defendants.*

On Petition for Writ of Certiorari  
From U.S. Court of Appeals for the Fourth Circuit  
Appealed from the U.S. District Court, District of South Carolina

Motion for Leave to Proceed on Appeal In Forma Pauperis  
For the Writ of Certiorari



Bishop Ruben DeWayne  
5105 N. Main Street, Bld. A.  
Columbia, South Carolina 29203  
(803) 200-5105  
*20 years victim of Judicial Kleptocracy*

- iii. The Mandate is dated December 11, 2020 and received by Petitioner on December 15, 2020. Where the judgment of the Fourth Circuit was entered on November, 19, 2020.
- iv. WHEREAS, Petitioner believes if any reasonable minded persons appointed to sit at bench or by tribunal were to look and review the lower court record, such a denial of rights withheld are in direct, complete contrast of the U.S. Constitution and those provisions the Founding Fathers intended to ensure for all of We the People.
- v. Inasmuch as, the Petitioner holds a 10<sup>th</sup> grade education, biology was one of Petitioner's favorite subjects, he knows too well the risk of COVID-19, the mutation time cycles that finally named one of the new viruses that stemmed from corona virus name of "Variant". Petitioner is unable to work due to this pandemic which warrants granting the "IFP" to review and amend the bad behavior against this 59-year-old Petitioner, that has been ongoing for the past 20 years, without any relief or remedy whatsoever, warrants judicial review to verify the compelling circumstances of a human being subjected to oppression right under the nose of this Supreme Court of the United States.

## DECLARATION OF SERVICE:

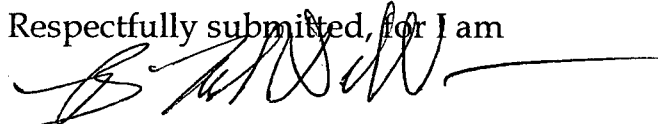
I, Bishop Ruben DeWayne do hereby declare that I have served a true and correct copy of:

Motion for Leave to Proceed on Appeal in Forma Pauperis  
For the Writ of Certiorari

upon the Respondents/ Appellees by First Class Mail of the U.S. Postal Service  
(pre-paid) this 22<sup>nd</sup> day of February, 2021 at the addresses listed below.

J.P. MORGAN MORTGAGE ACQUISITION CORP. and  
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC.  
c/o NELSON MULLINS  
P.O. Box 11070  
Columbia, SC 29211-1070

Respectfully submitted, for I am



The Bishop Ruben DeWayne  
c/o 5105 N. Main Street Bld. A.  
Columbia, South Carolina 29203  
(803) 200-5105

cc: Leitta R. Brooks, Appellant's Predecessor

ORIGINAL  
~~COPY~~

No. \_\_\_\_\_

IN THE  
SUPREME COURT OF THE UNITED STATES

Bishop Roben DeWayne PETITIONER  
(Your Name)

VS.

J.P. MORAN MORTGAGE ACQUISITION CORP. 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 of South Carolina (lower court)  
" " " " " District of Columbia

☐ 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.

B. DeWayne  
(Signature)

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

I, Bishop Ruben DeWayne, 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 <sup>N/A</sup>  | You                           | Spouse <sup>N/A</sup>  |
| Employment   | \$ <u>N/A</u>                                    | \$ <u>          </u>   | \$ <u>N/A</u>                 | \$ <u>          </u>   |
| Self-employment  | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Income from real property (such as rental income)                    | \$ <u>1,000.<sup>00</sup></u>                    | \$ <u>          </u>   | \$ <u>1,000.<sup>00</sup></u> | \$ <u>          </u>   |
| Interest and dividends   | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Gifts  | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Alimony  | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Child Support  | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Retirement (such as social security, pensions, annuities, insurance) | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Disability (such as social security, insurance payments)             | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Unemployment payments  | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Public-assistance (such as welfare)                                  | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| Other (specify): <u>          </u>                                   | \$ <u>0</u>                                      | \$ <u>          </u>   | \$ <u>0</u>                   | \$ <u>          </u>   |
| <b>Total monthly income:</b>   | \$ <u>1,000.<sup>00</sup></u>                    | \$ <u>          </u>  | \$ <u>1,000.<sup>00</sup></u> | \$ <u>          </u>  |

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      |         |                     | \$                |
|          |         |                     | \$                |
|          |         |                     | \$                |

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? \$  
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 |
|---|-----------------|------------------------|
| All South FCU CHECKING                      | \$ 51.22        | \$ N/A                 |
| " " " SAVINGS                               | \$ 8.00         | \$                     |
| CITIZENS BANK CHECKING                      | \$ 13.00        | \$                     |
| M&T   | \$ 7.29         | \$                     |

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

☒ Home  
Value 500K

☐ Other real estate  
Value \_\_\_\_\_

☒ Motor Vehicle #1  
Year, make & model 1977 Ford T-Bird  
Value 2,500

☐ 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 |
|---------------------------------------|--------------------|----------------------------|
| J.P. MORGAN MORTGAGE ACQUISITION CORP | \$ 500K            | \$ N/A                     |
| IRS                                   | \$ 10K             | \$ N/A                     |
| OPD SOCRATES GROUP                    | \$ 7,500.00        | \$                         |

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 |
|------|--------------|-----|
| 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.

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

Are real estate taxes included? ☐ Yes ☒ No  
Is property insurance included? ☐ Yes ☒ No

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

Home maintenance (repairs and upkeep)

Food

Clothing

Laundry and dry-cleaning

Medical and dental expenses

You

Your spouse

|             |        |
|-------------|--------|
| \$ 0        | \$ N/A |
| \$ 1,800.00 | \$     |
| \$ 0        | \$     |
| \$ 85.00    | \$     |
| \$ 0        | \$     |
| \$ 0        | \$     |
| \$ 0        | \$     |

|   | You        | N/A<br>Your spouse |
|---|------------|--------------------|
| Transportation (not including motor vehicle payments)                                       | \$ 25.00   | \$                 |
| Recreation, entertainment, newspapers, magazines, etc.                                      | \$ 0       | \$                 |
| Insurance (not deducted from wages or included in mortgage payments)                        |            |                    |
| Homeowner's or renter's   | \$ 0       | \$                 |
| Life  | \$ 4400    | \$                 |
| Health  | \$ 0       | \$                 |
| Motor Vehicle   | \$ 0       | \$                 |
| Other: _____  | \$ 0       | \$                 |
| Taxes (not deducted from wages or included in mortgage payments)                            |            |                    |
| (specify): _____  | \$ 0       | \$                 |
| Installment payments  |            |                    |
| Motor Vehicle   | \$ 0       | \$                 |
| Credit card(s)  | \$ 0       | \$                 |
| Department store(s)   | \$ 0       | \$                 |
| Other: _____  | \$ 0       | \$                 |
| Alimony, maintenance, and support paid to others  | \$ 0       | \$                 |
| Regular expenses for operation of business, profession, or farm (attach detailed statement) | \$ 0       | \$                 |
| Other (specify): _____  | \$ 0       | \$                 |
| <b>Total monthly expenses:</b>  | \$ 1869.00 | \$                 |



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.

PANDEMIC CANNOT WORK IN HOMES

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? \_\_\_\_\_

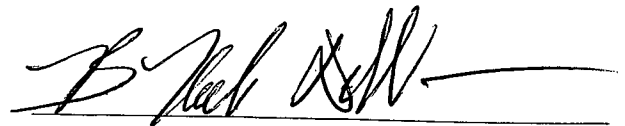
If yes, state the person's name, address, and telephone number:

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

UNABLE TO WORK BECAUSE OF COVID-19 & SARS-VARIAN. THE COURTS HAVE TAKEN MY WEALTH & DISMISSED MY ACTIONS W/O A TRIAL OR HEARING.

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

Executed on: 2-22-2021, 20\_\_

  
(Signature)