

21-5359  
No.

ORIGINAL

IN THE  
SUPREME COURT OF THE UNITED STATES

FILED  
AUG 06 2021  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

ELLIS KEYES

— PETITIONER

(Your Name)

VS.

EDISON BANKS

— 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*. MANDAMUS

Please check the appropriate boxes:

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

UNITED STATES SUPREME COURT

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.

  
(Signature)

RECEIVED

AUG 10 2021

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

Subscribed and sworn to before me by Ellis Keyes on  
August 6, 2021.

My Commission Expires: December 27, 2024

Linda Bell  
Notary  
ID# KYNP19051

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

I, ELLIS KEYES, 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	\$ 50.00	\$ not applicable	\$ 50.00	\$ NA
Self-employment	\$ 0	\$ NA	\$ 0	\$ NA
Income from real property (such as rental income)	\$ 0	\$ NA	\$ 0	\$ NA
Interest and dividends	\$ unknown	\$ NA	\$ 0	\$ NA
Gifts	\$ 0	\$ NA	\$ 0	\$ NA
Alimony	\$ 0	\$ NA	\$ 0	\$ NA
Child Support	\$ 0	\$ NA	\$ 0	\$ NA
Retirement (such as social security, pensions, annuities, insurance)	\$ 700.	\$ NQA	\$ 0	\$ NA
Disability (such as social security, insurance payments)	\$ same as above	\$ NA	\$ Social Security	\$ NA
Unemployment payments	\$ 0	\$ NA	\$ 0	\$ NA
Public-assistance (such as welfare)	\$ 0	\$ NA	\$ 0	\$ NA
Other (specify):	\$ 0	\$ NA	\$ 0	\$ NA
<b>Total monthly income:</b>	<b>\$ 750.00</b>	<b>\$ NA</b>	<b>\$ NA</b>	<b>\$ NA</b>

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
Laerence Merchandising	Plymouth Minisota	since 2006	\$ about \$50.00
			\$
			\$
			\$

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.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross monthly pay</b>
	NOT APPLICABLE		\$
			\$
			\$

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.

<b>Financial institution</b>	<b>Type of account</b>	<b>Amount you have</b>	<b>Amount your spouse has</b>
Witaker Bank	Checking	\$ less than 1,000.	\$ NA
		\$	\$
		\$	\$

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

Home

Value 1,500.00 assessed

Other real estate

Value \_\_\_\_\_

Motor Vehicle #1

Year, make & model 2007 Toyota Yaris

Value 0 resale 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.

<b>Person owing you or your spouse money</b>	<b>Amount owed to you</b>	<b>Amount owed to your spouse</b>
count	\$ cost more than six thousand	\$ NA
\$	\$	\$
\$	\$	\$

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

<b>Name</b>	<b>Relationship</b>	<b>Age</b>
none		

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.

	<b>You</b>	<b>Your spouse</b>
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 0	\$ NA
Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 20.00	\$ NA
Home maintenance (repairs and upkeep)	\$ 10.00	\$ NA
Food	\$ 200.00	\$ NA
Clothing	\$ 0	\$ NA
Laundry and dry-cleaning	\$ 10.00	\$ NA
Medical and dental expenses	\$ Medicare	\$ NA

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor <sup>3</sup> vehicle payments)	\$ 300.00	\$ NA
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ NA
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 50.00 auto	\$ NA
Life	\$ 0	\$ 0
Health	\$ _____	\$ _____
Motor Vehicle	\$ above said	\$ NA
Other: _____	\$ 0	\$ NA
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ unknown	\$ NA
Installment payments		
Motor Vehicle	\$ 0	\$ NA
Credit card(s)	\$ 0	\$ NA
Department store(s)	\$ 0	\$ NA
Other: _____	\$ 0	\$ NA
Alimony, maintenance, and support paid to others	\$ 0	\$ NA
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ NAS
Other (specify): _____	\$ 0	\$ NA
<b>Total monthly expenses:</b>	<b>\$ 350.00 or more</b>	<b>\$ NA</b>

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.  
X

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  
X

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? \$6,500.00

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

Printing paid

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

I am a poor person with a low income.  
I declare under penalty of perjury that the foregoing is true and correct.

Executed on: August 17th, 2021  
August 17th 21



(Signature)

ELLIS KEYES

- NO:

IN THE SUPREME COURT OF THE UNITED STATES

Ellis Keyes, Petitioner, versus Edison Banks, Respondent.

**AFFIDAVIT ACCOMPANYING MOTION FOR PERMISSION TO PROCEED IN FORMA PAUPERIS** I affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. September 30, 2020

My issues on appeal are to uphold constitutional law.

I estimate my net monthly income is about \$750.00 average monthly income during the past 12 months and project next month employment of about \$100.00 Self-employment \$00.00 Income from real property (such as rental income) \$00.00 Interest and dividends \$00.00 Retirement (such as social security, pensions, annuities, insurance) \$750. Disability social security) Unemployment payments \$00.00 Public assistance (such as welfare) \$00.00 Other: \$00.00 Total monthly income: \$750.00

2. Employment history for the past two years part time with Lawrence Merchandising, 1405 Xenium Lane N. Suite 250, Plymouth, MN 55441, earning monthly pay of about \$50.00

3. I have cash on hand of about \$100.00. and in the bank less, than a thousand, in a checking account.

My assets, and their values, which I own is my home \$1,500.00 assessed value, a 2007 Toyota Yaris of zero resale value.

I cannot pay the docket fees for my petition.

My legal residence is Whitesburg, Kentucky. My daytime phone number: (606) 821-9815.

APPLICATION TO PROCEED IN U S SUPREME COURT WITHOUT  
PREPAYING FEES OR COSTS

Ellis Keyes, hereby certifies and declares under penalty of perjury that the following is true and correct:

1. I am the Applicant in this action. This proceeding is brought in good faith and it is my intention to proceed to a final order on the merits.
2. I have valid reasons for bringing this action and am entitled to relief.
3. I have no means or ability with which to pay any of the legal fees, Charges, costs, or disbursements necessary to commence and prosecute this action or with which to post security for same.
4. My household consists of myself. My income per month is about seven hundred fifty dollars (\$750.00) which is derived from Social security and part time employment With this income I have the following monthly expenses:

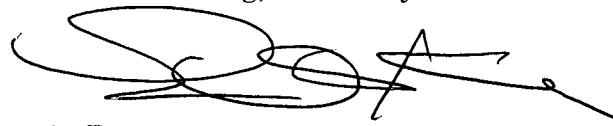
Phone -\$ 50.00, Utilities -\$ 50.00, Food -\$ 180.00, Transportation -\$400.00

Insurance -\$ 50.00, Laundry, \$ 20.00, Total \$ 750.00. Money I have in cash, checking, account is less than a thousand dollars.

5. I own a automobile worth zero resale value, real estate property of my home is assessed at \$1,500.00, with no stocks, bonds, security or trust. The only jewelry is my father's wedding band worn by me, not for sale, priceless. Assets consist of household furnishings of nominal value, clothing and personal effects.

6. Debts include medical bills to Mountain Comprehensive Health of about \$700., I have no income other than stated. I declare under penalty of perjury that the above information is true and understand that a false statement may result in dismissal. August 17th, 2021 at Whitesburg, Kentucky.

Respectfully



Ellis Keyes, Propria Persona

*Subscribed and sworn to before me by Ellis Keyes  
on August 4, 2021.*

*My Commission Expires: December 27, 2024*

*Linda Bell  
Notary  
ID #: KYNP19051*