

ORIGINAL

No. 21-5458

In the Supreme Court of the United States

Supreme Court, U.S.
FILED
AUG 17 2021

OFFICE OF THE CLERK

HENRY J. DULAURENCE, III

Petitioner

v.

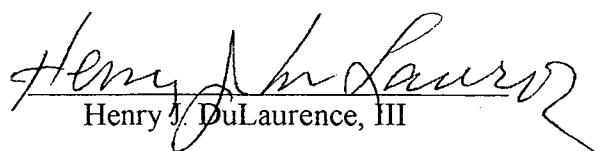
JUDGE DOUGLAS P. WOODLOCK, individually
and in his official capacity

Respondent

**PETITIONER'S MOTION FOR LEAVE TO PROCEED
IN FORMA PAUPERIS**

Now comes the petitioner in the above entitled action and prays that this Honorable Court allow him to proceed *in forma pauperis*, pursuant to Supreme Court Rule 39. Leave to proceed *in forma pauperis* was sought and granted by the Massachusetts Supreme Judicial Court in his Petition for Further Appellate Review, December 27, 2012. Leave to proceed *in forma paupers* was granted by Federal Appeals Court Judges Howard, Thompson, and Kayatta in their Judgment of November 30, 2016, at Appendix Exhibit H.

Petitioner's affidavit and declaration in support of this motion are attached hereto.


Henry J. DuLaurence, III

RECEIVED

AUG 24 2021

OFFICE OF THE CLERK
SUPREME COURT, U.S.

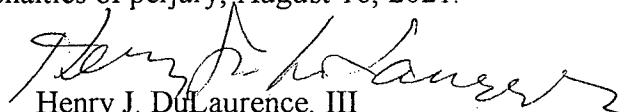
PETITIONER'S AFFIDAVIT

The petitioner has in access of \$25,000 in credit card debt. Please see attached statements, one from Chase Manhattan Bank, and two from Bank of America. The petitioner owes the Federal government, IRS, in access of \$1200 in income taxes, which statement is attached.

Respectfully submitted,


Henry J. DuLaurence, III
Petitioner
1 South Union Street, #114
Lawrence, MA 01843
(978) 208-1399

Signed under the pains and penalties of perjury, August 16, 2021.


Henry J. DuLaurence, III
Petitioner

Ganick, O'Brien & Sarin
Attorneys at Law
161 Granite Avenue
Dorchester, MA 02124
(617) 288-4050 Fax: (617) 288-0296

July 22, 2021

Henry J. Dulaurence
1 S. Union St #114
Lawrence, MA 01843

RE: Chase Manhattan Bank USA, National Association

VS: Henry J. Dulaurence

Case #: 041584

Dear Mr. Dulaurence:

Please forward \$16653.06 to close out this account.

Very truly yours,
GANICK, O'BRIEN & SARIN

Kevin McCaughey
GANICK, O'BRIEN & SARIN
161 Granite Avenue
Dorchester, MA 02124

This is an attempt to collect a debt. Any information obtained
will be used for that purpose.

KJM/120049/SRVL49

NOW ACCEPTING VISA, MASTERCARD & DISCOVER!
WE DO NOT ACCEPT CREDIT/DEBIT CARD PAYMENTS LESS THAN \$50.00.
PAY ONLINE @ www.ganickobriensarin.com

BANK OF AMERICA



P.O. BOX 15284
WILMINGTON, DE 19850

Statement Enclosed

SS 0719 N 895 812 1 01592 #@01 AV 0.398

HENRY J DULAURENCE
1 S UNION ST APT 114
LAWRENCE MA 01843-1696

Customer Service Information:

www.bankofamerica.com
1.800.421.2110

Mail billing inquiries to:

Bank of America
P.O. Box 982234
El Paso TX 79998-2234

Mail payment to:

Bank of America
P.O. Box 15019
Wilmington DE 19886-5019



June 16 - July 15, 2021

8349

Account Summary

Previous Balance	\$4,515.99
Payments and Other Credits	-\$100.00
Purchases and Adjustments	\$49.46
Fees Charged	\$0.00
Interest Charged	\$37.73
 New Balance Total	 \$4,503.18
Total Credit Line	\$4,500.00
Total Credit Available	\$0.00
Cash Credit Line	\$1,400.00
Portion of Credit Available for Cash	\$0.00
Statement Closing Date	07/15/2021
Days in Billing Cycle	30

Payment Information

New Balance Total	\$4,503.18
Current Payment Due	\$82.00
 Total Minimum Payment Due	 \$82.00
Payment Due Date	08/12/2021

Late Payment Warning: If we do not receive your Total Minimum Payment by the date listed above, you may have to pay a late fee of up to **\$39.00** and your APRs may be increased up to the Penalty APR of **29.99%**.

Total Minimum Payment Warning: If you make only the Total Minimum Payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay	You will payoff the balance shown on this statement in about	And you will end up paying an estimated total of
Only the Total Minimum Payment	16 years	\$7,653.00
\$146.00	36 months	\$5,256.00 (Savings = \$2,397.00)

If you would like information about credit counseling services, call 866.300.5238.



P.O. BOX 15284
WILMINGTON, DE 19850

Statement Enclosed

SS 0708 N 869 699 1 12629 #01 AV 0.398

HENRY J DULAURENCE
1 S UNION ST APT 114
LAWRENCE MA 01843-1696

Customer Service Information:
www.bankofamerica.com
1.800.421.2110

Mail billing inquiries to:
Bank of America
P.O. Box 982234
El Paso TX 79998-2234

Mail payment to:
Bank of America
P.O. Box 15019
Wilmington DE 19886-5019



June 6 - July 5, 2021

Account #  7946

Account Summary

Previous Balance	\$4,652.90
Payments and Other Credits	-\$100.00
Purchases and Adjustments	\$40.00
Fees Charged	\$0.00
Interest Charged	\$27.63
 New Balance Total	 \$4,620.53
Total Credit Line	\$4,700.00
Total Credit Available	\$79.47
Cash Credit Line	\$1,500.00
Portion of Credit Available for Cash	\$79.47
Statement Closing Date	07/05/2021
Days in Billing Cycle	30

Payment Information

New Balance Total	\$4,620.53
Current Payment Due	\$73.00
Total Minimum Payment Due	\$73.00
Payment Due Date	08/02/2021

Late Payment Warning: If we do not receive your Total Minimum Payment by the date listed above, you may have to pay a late fee of up to **\$39.00** and your APRs may be increased up to the Penalty APR of **29.99%**.

Total Minimum Payment Warning: If you make only the Total Minimum Payment each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay	You will payoff the balance shown on this statement in about	And you will end up paying an estimated total of
Only the Total Minimum Payment	16 years	\$6,864.00
\$143.00	36 months	\$5,148.00 (Savings = \$1,716.00)

If you would like information about credit counseling services, call 866.300.5238.



Notice	CP521
Notice date	August 11, 2021
Taxpayer ID number	XXX-XX-2800
Page 3 of 5	

Installment agreement summary

Tax year	Form	Amount you owe	Failure-to-pay penalty to date	Interest charges to date
2016	1040	566.57	121.57	166.35
2017	1040	358.71	42.57	68.14
2019	1040	286.59	1.38	9.21

008237 **Remaining balance** **\$1,211.87**

The penalty and interest charges shown above represent the total amounts charged since your liability became due. To determine the amount of penalty and interest charged since your last reminder notice, compare the amounts in last month's reminder notice with the amounts shown above.

Penalties

We are required by law to charge any applicable penalties.

Failure-to-pay

Description	Amount
Total failure-to-pay	\$165.52

We assess a 1/2% monthly penalty for not paying the tax you owe by the due date. We base the monthly penalty for paying late on the net unpaid tax at the beginning of each penalty month following the payment due date for that tax. This penalty applies even if you filed the return on time.

We charge the penalty for each month or part of a month the payment is late; however, the penalty can't be more than 25% in total.

- The due date for payment of the tax shown on a return generally is the return due date, without regard to extensions.
- The due date for paying increases in tax is within 21 days of the date of our notice demanding payment (10 business days if the amount in the notice is \$100,000 or more).

If we issue a Notice of Intent to Levy and you don't pay the balance due within 10 days of the date of the notice, the penalty for paying late increases to 1% per month. If you receive a Notice of Intent to Levy, you will also receive information on how to appeal if you disagree with the action. We'll provide information about your appeal rights with the notice and you'll have the opportunity to appeal at that time.

For individuals who filed on time, the penalty decreases to 1/4% per month while an approved installment agreement with the IRS is in effect for payment of that tax.

For a detailed calculation of your penalty charges, call 800-829-0922. (Internal Revenue Code Section 6651)

**AFFIDAVIT OR DECLARATION
IN SUPPORT OF MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERS*
Rule 24(a) (1) (A), and Rule 24(a) (1) (B)**

I, Henry J. DuLaurence, III, am the plaintiff in the above-entitled action. 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 therefore (see attached "Order"); 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	\$ None ____	\$ N/A	\$ None _____	\$ N/A
Self-employment	\$ None ____	\$ N/A	\$ None _____	\$ N/A
Income from real property (such as rental income)	\$ None ____	\$ N/A	\$ None _____	\$ N/A
Interest and dividends	\$ None ____	\$ N/A	\$ None _____	\$ N/A
Gifts	\$ None ____	\$ N/A	\$ None _____	\$ N/A
Alimony	\$ None ____	\$ N/A	\$ None _____	\$ N/A
Child Support	\$ None ____	\$ N/A	\$ None _____	\$ N/A
Retirement (social security, pensions, Security)	\$1644.00 ____	\$ N/A	\$ None _____	\$ N/A
Disability (such as social security, insurance payments)	\$ None ____	\$ N/A _____	\$ None.	\$ N/A
Unemployment payments	\$ None ____	\$ N/A _____	\$ None	\$ N/A
Public-assistance	\$ None ____	\$ N/A	\$ None	\$ _____ (such
Other (specify): Pension	\$1694.83 ____	\$ N/A _____	\$ None _____	\$ N/A _____
Total monthly income:	\$3338.83	\$ N/A	\$3338.83	\$ N/A

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: Not Employed	Gross monthly pay
_____	_____	_____	\$_____
_____	_____	_____	\$_____
_____	_____	_____	\$_____

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.)

N/A

Employer	Address	Dates of Employment	Gross monthly pay
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. How much cash do you have? \$ Approximately \$15.00

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution Type of account:

Checking—Santander Bank

Amount you have	Amount your spouse has
\$ Approx. \$400.00	\$ N/A _____
\$ _____	\$ _____
\$ _____	\$ _____

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

p Home

Value: N/A _____

0 Other real estate

Value: N/A

E1 Motor Vehicle #1

Year, make & model: N/A

Value _____

E1 Motor Vehicle #2

Year, make & model: N/A _____

Value _____

0 Other assets Description

Value: N/A _____

6. State every person, business, or organization owing you or your spouse money, and the amount owed. N/A.

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

None.

8. Estimate the monthly expenses of you and your family.

Rent payment \$2200.00

Are real estate taxes included? No. Is liability insurance included? No.

Home maintenance (repairs and upkeep) \$ None

Food Approx. \$50.00

Approx. \$2.00 \$

Medical and dental expenses Approx. \$325-350.00 \$ _____

	You	Your spouse
Transportation: gas and public MBTA	Approx. \$30.00	\$ N/A _____
Recreation, entertainment, newspapers, magazines, etc.	Approx. \$60.00	\$ _____
Insurance -- renter's	\$11.00	\$
Life	\$ 0 _____	\$
Health	\$ See medical	\$ _____
Motor Vehicle	\$ 0 _____	\$
Other: _____	\$ None	\$
Taxes (not deducted from wages): specify):		
State and Federal Income Taxes: IRS, 2014 and 2017-\$50/ month (on approx. \$1200). See attached affidavit.		
Bank of America credit card-\$100 (on approx. \$4500);		
Bank of America credit card-\$100 (on approx. \$4700).		
	\$200/mo.	\$ _____
Department store(s)	\$ None	\$ _____
Other:	\$ None	\$
Alimony, maintenance, and support paid to others	\$ None	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ None	\$ _____
Other (specify): _____	\$ None _____	\$ _____
Total monthly expenses:	Approx. \$2800.00	\$ _____

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

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? No.

If yes, how much? 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?

El Yes-Approx. \$400 (instant civil rights case); Approx. \$20,585 (employment case); Approx. \$14.000 (anti-Slapp case).

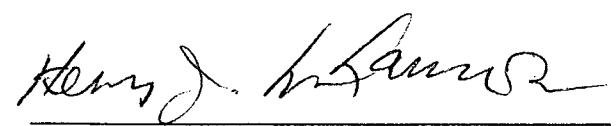
If yes, state the person's name, address, and telephone number: INSTANT CASE: FedEx, 600 Broadway, Saugus, MA 01906; (781) 941-2300. Salem Post Office, Salem, MA 01970; (800) 275-8777.

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

I still owe Federal income taxes approximately \$1200. I still owe approximately \$5400 in costs assessed against me for the trial in the employment case; and \$29,858.82 in anti-SLAPP costs and attorneys' fees assessed against me in the second case, and \$16,500 in a Chase Manhattan Bank case. See attached affidavit.

I swear or 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. sec. 1746; 18 U.S.C. sec. 1621.)

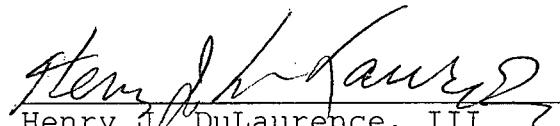
Executed on: August 17, 2021


(Signature)

CERTIFICATE OF SERVICE

I, Henry J. DuLaurence, III, hereby certify that on August 17, 2021 a copy of PETITION'S MOTION TO PROCEED *IN FORMA PAUPERIS* was sent by first class mail, postage prepaid, to:

Christopher Morgan, Esq. (representing Judge Woodlock)
United States Attorney's Office
300 State Street, Suite 230
Springfield, MA 01105


Henry J. DuLaurence, III

Petitioner

1 South Union Street, #114
Lawrence, MA 01843
(978) 208-1399