

31-8826
No.

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

FILED
OCT 14 2021
OFFICE OF THE CLERK
SUPREME COURT, U.S.

RONALD DEAN HINGER PETITIONER PRO SE
(Your Name)

VS.

MICHIGAN SUPREME COURT 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):

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: _____
28 U.S.C § 1746, or

a copy of the order of appointment is appended.

Ronald Dean Hinger
(Signature)

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

I, Donald Sean Ellinger, 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)	\$ 15 13	\$ none	\$ 15 13	\$ none
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:	\$ 15 13	\$ 0	\$ 15 13	\$ 0

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
<u>OPERATING</u> <u>ENGINEERS</u> <u>Local 327</u>	<u>550 HULET DRIVE</u> <u>ALBION, MI 49224</u> <u>7UP, MI 48203</u>	<u>1968 TO 1990</u>	<u>\$ 473</u> <u>\$</u> <u>\$</u>

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
<u>S.S. A.</u> <u>Retired</u>	<u>SOCIAL</u> <u>SECURITY</u> <u>ADMINISTRAT</u> <u>ION</u>	<u>1968 TO 1990</u>	<u>\$ 1040</u> <u>\$</u> <u>\$</u>

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
<u>CHECKING</u>	<u>\$ 50</u>	<u>\$ 0</u>
<u>SAVINGS</u>	<u>\$ 200</u>	<u>\$ 0</u>
	<u>\$</u>	<u>\$</u>

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

Home
Value 57,300

Other real estate
Value _____

Motor Vehicle #1 2002
Year, make & model DODGE DAKOTA
Value 2000

Motor Vehicle #2 2017
Year, make & model TOYOTA COROLLA
Value 8000

Other assets
Description BOAT
Value 100

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>none</u>	\$ <u>none</u>	\$ <u>no spouse</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>none</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.

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>0</u>	\$ <u>0</u>
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>275</u>	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>50</u>	\$ <u>0</u>
Food	\$ <u>400</u>	\$ <u>0</u>
Clothing	\$ <u>50</u>	\$ <u>0</u>
Laundry and dry-cleaning	\$ <u>50</u>	\$ <u>0</u>
Medical and dental expenses	\$ <u>100</u>	\$ <u>0</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 100	\$ 0
Recreation, entertainment, newspapers, magazines, etc.	\$ 50	\$ 0
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 50	\$ 0
Life	\$ 0	\$ 0
Health	\$ 0	\$ 0
Motor Vehicle <i>insurance</i>	\$ 110	\$ 0
Other: <i>rent</i>	\$ 100	\$ 0
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <i>PROPERTY / SALES TAXES</i>	\$ 150	\$ 0
Installment payments		
Motor Vehicle	\$ 0	\$ 0
Credit card(s)	\$ 0	\$ 0
Department store(s)	\$ 0	\$ 0
Other: _____	\$ 0	\$ 0
Alimony, maintenance, and support paid to others	\$ 0	\$ 0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ 0
Other (specify): _____	\$ 25	\$ 0
Total monthly expenses:	\$ 585	\$ 0

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.

EX50000005 MEDICAL GAS EXPENSES
PRESERVATIVES
MEMO TO BILLS
Dental 21223

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? 1535 ~~25 monthly court payment~~

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

DANIEL S. MCKENZIE P 3088,
108 S WOODRIDGE ST.
BESSMER MI

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? MAILING COST 117.38 + interest 20%

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

ONTONAGON COUNTY 906 884 4901
620 COUGAR MCREE ST.
ONTONAGON MI, 49953 906 884 2769

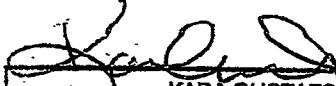
12. Provide any other information that will help explain why you cannot pay the costs of this case.

2018 Home 2035 20,000 power mask 200-
SOFFIT FALIER Basement 4000 FREEZER
2019 REPAIR COST medical cost 2021
EACH 200

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

Executed on: DECEMBER 3, 2021

Ronald Dean Ellingson
(Signature)


KARA GUSTAFSON
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF ONTONAGON
MY COMMISSION EXPIRES DECEMBER 17, 2024
ACTING IN THE COUNTY OF ONTONAGON