

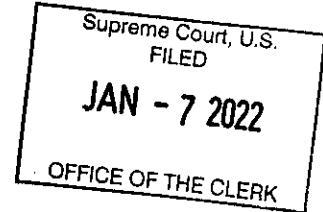
21-7043

ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

Benson, Ada Maria — PETITIONER
(Your Name)



Allstate Insurance Co. — 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):

N/A

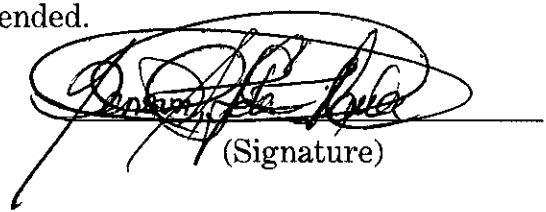
Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

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)

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

I, _____, 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>0</u>	\$ <u>dead</u>	\$ <u>1,500.</u>	\$ <u>dead</u>
Self-employment	\$ <u>150</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Interest and dividends	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Gifts	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Alimony	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Child Support	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Unemployment payments	\$ <u>425</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>dead</u>	\$ <u>0</u>	\$ <u>dead</u>
Other (specify): <u>EBT</u>	\$ <u>198⁰⁰</u>	\$ <u>dead</u>	\$ <u>198⁰⁰</u>	\$ <u>dead</u>
Total monthly income:	\$ <u>798⁰⁰</u>	\$ <u>dead</u>	\$ <u>1,698⁰⁰</u>	\$ <u>dead</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
Census 2020-Dpt of Commerce	4600 Silver Hills Rd. Hillcrest, MD 20746	07/2020 - 01/21	\$ 2,000.00
IHSS - DPSS	Moreno Valley	10/2019 - 04/20	\$ 1,500.00
IHTTC	233 Carmelita Ave. Hemet, CA 92543	03/2018 - 10/2019	\$ 1,500
IHSS	12125 Day St. St. 101 Moreno Valley, CA 92504		

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
deceased	deceased	deceased	\$ N/A
deceased	deceased	deceased	\$ N/A
deceased	deceased	deceased	\$ N/A

4. How much cash do you and your ~~spouse~~ have? \$ 200.
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
Savings	\$ 2,000.00	\$ dead
Savings	\$ 400.00	\$ dead
	\$ 0	\$ 0

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

Home
Value N/A

Other real estate
Value N/A

Motor Vehicle #1
Year, make & model Dodge Caravan
Value 3,000

Motor Vehicle #2
Year, make & model None
Value 0

Other assets
Description Personal books and personal toys.
Value 0

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
Census Dept Comm. \$ 2,000.00 + ITSS-DPSS Wages - In Court fines, add workers Comp, add wages	\$ 2,000.00 + \$ Deceased	\$ Deceased
Novitas Solution. \$ 14,000. (Labor)	\$ 14,000. (Labor)	\$ Deceased

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
Self -	Self	59
Planning to have two children Soon		

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)	\$ 212.00	\$ dead.
Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 25.00	\$ dead
Home maintenance (repairs and upkeep)	\$ 0	\$ dead.
Food	\$ 25.00	\$ dead.
Clothing	\$ 40.00	\$ dead.
Laundry and dry-cleaning	\$ 20.00	\$ dead.
Medical and dental expenses	\$ 8	\$ dead

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 90.00	\$ dead
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ dead.
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ dead.
Life	\$ 0	\$ dead
Health	\$ 0	\$ dead.
Motor Vehicle	\$ 45.00	\$ dead.
Other: <u>Hygiene</u>	\$ 25.00	\$ dead.
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$ dead.
Installment payments		
Motor Vehicle	\$ 0	\$ dead.
Credit card(s)	\$ 0	\$ dead.
Department store(s)	\$ 0	\$ dead.
Other: _____	\$ 0	\$ dead.
Alimony, maintenance, and support paid to others	\$ 0	\$ dead.
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ dead.
Other (specify): <u>Emergencies gasoline</u>	\$ 200.00	\$ dead
Total monthly expenses:	\$ 657.00	\$ dead.

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.

I am scheduled to start working as Substitute Teacher on January 10, 2022.

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? Persona Propria.

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

Per se. It is very expensive to process documents. Per-se should be recognized attorney's fees by defendants.

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? Per Se.

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

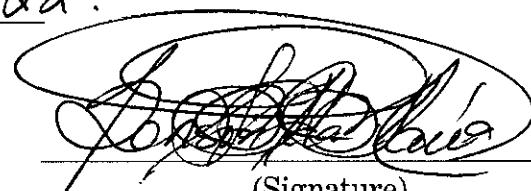
Not Applicable.

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

Two Former employers failed to pay wages. IHSS and Department of Commerce. Norita's Spiration owes for labor. I have only received minimum EDD. and less than \$100 in self-serve.

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

Executed on: January 01, 2022.

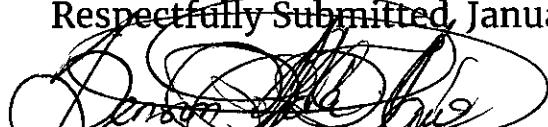

(Signature)

Case: Benson, Ada Maria v. Allstate Insurance Company
Appeals Ninth Circuit No: Case No: 21-55833 District Court Case
No::21-cv-01046

AFFIDAVIT-DECLARATION UNDER Rule 29 OF THE SUPREME COURT

I Benson, Ada Maria, (Persona Propia) declare under penalty of perjury and under the Constitutional laws of the United States, that I am serving via PACER and USPS mail delivery a copy of the petition made to the Supreme Court to all parties involved in this matter in compliance with the Rule 29 of the Supreme Court and in compliance with the 28 U. S. C. § 1746.

Respectfully Submitted, January 01, 2022



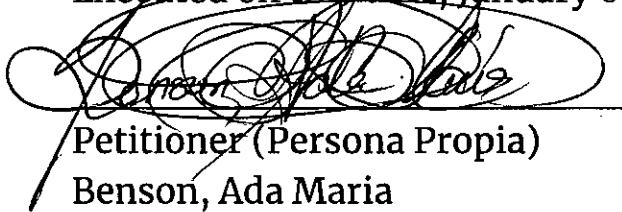
Benson, Ada Maria
(Persona Propria)

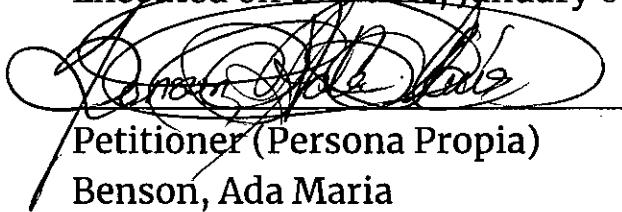
**Case: Benson, Ada Maria v. Allstate Insurance Company
Appeals Ninth Circuit Case No: 21-55833 District Court Case
No.:21-cv-01046**

**UNSWORN DECLARATIONS UNDER PENALTY OF PERJURY
28 U.S. CODE § 1746 -**

I, Benson, Ada Maria (Persona Propia), declare (or certify, verify, or state) under penalty of perjury under the laws of the United States that the foregoing Petition For Writ Of Certiorari submitted to the United States Supreme Court is true and correct under 28 U.S. CODE § 1746.

Executed on this date, January 01, 2022



A handwritten signature in black ink, appearing to read "Benson, Ada Maria". The signature is written in a cursive style with a large, stylized "B" at the beginning.

Petitioner (Persona Propia)
Benson, Ada Maria

