

N. BYERLY  
20598 1m81  
13400 Pleasant  
Valley Rd.  
Buna Idaho 83634  
Petitioner prose

21-7945  
No. \_\_\_\_\_

ORIGINAL

IN THE  
SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S.  
FILED  
NOV - 8 2021  
OFFICE OF THE CLERK

NATHAN BYERLY — PETITIONER  
(Your Name)

VS.  
UNITED STATES; STATE OF IDAHO; ADA COUNTY; CITY OF BOISE;  
NEILPRKE; SAM HOAGLAND; ICSTELECOM; — RESPONDENT(S)  
et al. (SHORT TITLE)

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):

DISTRICT OF IDAHO, Ninth Circuit Court of Appeals  
DISTRICT OF UTAH - STATE OF UTAH, DISTRICT OF NEW JERSEY

☐ 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.

DATED this New Moon in APRIL 2022. (15 April 2022)  
N. BYERLY  
(Signature) - 1

N. BIERLY  
80898 (MS)  
13400 Pleasant Valley Rd.  
Knox Idaho 83634

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

I, NATHAN BIERLY, 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>0</u>	\$ _____
Self-employment	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Other (specify): _____	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Total monthly income:	\$ <u>0</u>	\$ _____	\$ <u>0</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
<u>None</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
			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 0  
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
		\$	\$
		\$	\$
		\$	\$

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

☐ Home  
Value \_\_\_\_\_

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

☐ Motor Vehicle #1  
Year, make & model \_\_\_\_\_  
Value \_\_\_\_\_

☐ Motor Vehicle #2  
Year, make & model \_\_\_\_\_  
Value \_\_\_\_\_

☒ Other assets  
Description Multiple claims to be processed and satisfied  
Value Not Valuable at equity presently  
302. Earth at 13500 Pleasant Valley Rd.  
Kona Idaho 83634  
Not presently Valuable at EQUITY.

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>0</u>	\$ <u>                    </u>	\$ <u>                    </u>
<u>(CLAIMS</u>	\$ <u>                    </u>	\$ <u>                    </u>
<u>FILED)</u>	\$ <u>                    </u>	\$ <u>                    </u>

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

Name	Relationship	Age
<u>0</u>	<u>                                    </u>	<u>                    </u>
<u>                                    </u>	<u>                                    </u>	<u>                    </u>
<u>                                    </u>	<u>                                    </u>	<u>                    </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>                    </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>0</u>	\$ <u>                    </u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>                    </u>
Food	\$ <u>0</u>	\$ <u>                    </u>
Clothing	\$ <u>0</u>	\$ <u>                    </u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>                    </u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>                    </u>

(7/1/2020 - 7/26/2021)

Trans Date	Trans Type	Offender Number	Offender Name	Living Unit	Received From	Paid To	Starting Balance	Trans Amount	Ending Balance
03/03/2021	Postage Payable	0080598	BYERLY, NATHAN BENJAMIN	B			\$0.00		
03/02/2021	Postage Payable	0080598	BYERLY, NATHAN BENJAMIN	B			\$0.00		
03/02/2021	Postage Payable	0080598	BYERLY, NATHAN BENJAMIN	B			\$0.00		
01/27/2021	Medical Payable	0080598	BYERLY, NATHAN BENJAMIN	B		Purchase Power	\$0.00	(\$6.60)	(\$6.60)
07/26/2021	State Court Filing Fee	0080598	BYERLY, NATHAN BENJAMIN	B		Medical - IDOC	\$2.50	(\$2.00)	\$0.50
01/26/2021	State Court Filing Fee	0080598	BYERLY, NATHAN BENJAMIN	B		IDaho Department of Correction	\$15.00	(\$12.50)	\$2.50
01/26/2021	State Court Filing Fee	0080598	BYERLY, NATHAN BENJAMIN	B		IDaho, U.S. DISTRICT COURT	\$20.00	(\$5.00)	\$15.00
07/08/2021	State Court Filing Fee	0080598	BYERLY, NATHAN BENJAMIN	B		BRUCE CLOTHIER	\$0.00	\$25.00	\$25.00
01/08/2021	State Court Filing Fee	0080598	BYERLY, NATHAN BENJAMIN	B		IDaho Department of Correction	\$8.99	(\$4.00)	\$4.99
01/08/2021	State Court Filing Fee	0080598	BYERLY, NATHAN BENJAMIN	B		IDaho, U.S. DISTRICT COURT	\$12.99	(\$4.00)	\$8.99
01/08/2021	State Court Filing Fee	0080598	BYERLY, NATHAN BENJAMIN	B		IDaho Department of Correction	\$19.99	(\$3.00)	\$16.99

I hereby certify that these records are true and correct copies of official records or reports or entries therein of the Idaho Department of Correction.

Date: 7/26/2021  
Signature: 