

UNITED STATES COURT OF APPEALS FOR THE SEVENTH CIRCUIT

Everett McKinley Dirksen
United States Courthouse
Room 2722 - 219 S. Dearborn Street
Chicago, Illinois 60604



Office of the Clerk
Phone: (312) 435-5850
www.ca7.uscourts.gov

NOTICE OF ISSUANCE OF MANDATE

June 30, 2021

To: Thomas G. Bruton
UNITED STATES DISTRICT COURT
Northern District of Illinois
Chicago, IL 60604-0000

No. 20-3462	PEARL HENYARD, Plaintiff - Appellant
	v. MV TRANSPORTATION and PACE, the Suburban Bus Division of the Regional Transportation Authority, Defendants - Appellees
Originating Case Information:	
District Court No: 1:15-cv-10835 Northern District of Illinois, Eastern Division District Judge Edmond E. Chang	

Herewith is the mandate of this court in this appeal, along with the Bill of Costs, if any. A certified copy of the opinion/order of the court and judgment, if any, and any direction as to costs shall constitute the mandate.

RECORD ON APPEAL STATUS:

No record to be returned

Appendix D

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ORDER

July 27, 2021

By the Court:

No. 20-3462	PEARL HENYARD, Plaintiff - Appellant
	v. MV TRANSPORTATION and PACE, the Suburban Bus Division of the Regional Transportation Authority, Defendants - Appellees
Originating Case Information:	
District Court No: 1:15-cv-10835 Northern District of Illinois, Eastern Division District Judge Edmond E. Chang	

The following are before the Court:

1. **MOTION FOR STAY OF THE MANDATE**, filed on July 22, 2021, by the pro se appellant.
2. **MOTION FOR CLARIFICATION**, filed on July 22, 2021, by the pro se appellant.
3. **MOTION FOR AN EXTENSION OF TIME**, filed on July 22, 2021, by the pro se appellant.
4. **NOTICE OF PETITION FOR AN EXTRAORDINARY WRIT**, filed on July 22, 2021, by the pro se appellant.

IT IS ORDERED that the request to stay the mandate is **DENIED**. This court's issuance of the mandate does not affect appellant's ability to seek review from the Supreme Court.

IT IS FURTHER ORDERED that to the extent that appellant seeks further rehearing in this appeal, the court **DENIES** her leave to file a second petition for rehearing.

IT IS FINALLY ORDERED that the court will take no action on appellant's petition for an extraordinary writ of certiorari. The appellant is reminded that any petition for a writ of

Appendix E

certiorari must be filed directly with the clerk of the United States Supreme Court and in accordance with the Supreme Court's rules.



Illinois Electronic Benefit Transfer (EBT) Link Card

1-800-678-LINK (5465)

Card Holder

PEARL HENYARD
03/01/1985
1512 N LA SALLE DR APT
416
CHICAGO IL 606100000

My Activity

Check Transaction History

Sep ▼ 2021 ▼

SEARCH

Card Balances
Request Replacement
Check Card Status

Report Problem Card
Select/Change PIN
Log Out

Card Balances

Card Number	Status	Issue Date	Status Date	SNAP Balance	Cash Balance
601453*****1222	Active	10/23/2018		\$471.79	\$0.00

Pending Benefits

Program	Type	Pending Benefit Amount	Benefit Available Date
SNAP	Regular	\$118.00	09/10/2021

SNAP Benefits Information

You are scheduled to receive SNAP benefits on the 10th of every month through 03/2022.

Appendix F

English | Español | 050, 010 ± 0 " 0 Š 0 © | Polski | 0, æ - # | 050 ± 0 - 0 ^



Social Security Administration Benefit Verification Letter

Date: September 9, 2021
BNC#: 21PL512D27094
REF: A, DI

PEARL A HENYARD
APT 416
1512 N LA SALLE DR
CHICAGO IL 60610-2019

You asked us for information from your record. The information that you requested is shown below. If you want anyone else to have this information, you may send them this letter.

Information About Current Social Security Benefits

Beginning December 2020, the full monthly Social Security benefit before any deductions is \$1,039.60.

We deduct \$148.50 for medical insurance premiums each month.

The regular monthly Social Security payment is \$891.00.
(We must round down to the whole dollar.)

Social Security benefits for a given month are paid the following month. (For example, Social Security benefits for March are paid in April.)

Your Social Security benefits are paid on or about the third of each month.

We found that you became disabled under our rules on February 9, 2017.

Information About Past Social Security Benefits

From December 2019 to November 2020, the full monthly Social Security benefit before any deductions was \$1,026.30.

We deducted \$144.60 for medical insurance premiums each month.

The regular monthly Social Security payment was \$881.00.
(We must round down to the whole dollar.)

Type of Social Security Benefit Information

You are entitled to monthly disability benefits.

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Information About Supplemental Security Income Payments

Beginning March 2021, the current Supplemental Security Income payment is \$0.00.

This payment amount may change from month to month if income or living situation changes.

Supplemental Security Income Payments are paid the month they are due.

(For example, Supplemental Security Income Payments for March are paid in March.)

Payments were stopped beginning March 2021.

We found that you became disabled under our rules on February 9, 2017.

Type of Supplemental Security Income Payment Information

You are entitled to monthly payments as a disabled individual.

Medicare Information

You are entitled to hospital insurance under Medicare beginning August 2019.

You are entitled to medical insurance under Medicare beginning August 2019.

Your Medicare number is 5XN2QJ7KM08. You may use this number to get medical services while waiting for your Medicare card.

If you have any questions, please log into Medicare.gov, or call 1-800-MEDICARE (1-800-633-4227).

Date of Birth Information

The date of birth shown on our records is March 1, 1985.

Suspect Social Security Fraud?

Please visit <http://oig.ssa.gov/r> or call the Inspector General's Fraud Hotline at 1-800-269-0271 (TTY 1-866-501-2101).

If You Have Questions

We invite you to visit our web site at www.socialsecurity.gov on the Internet to find general information about Social Security. If you have any specific questions, you may call us toll-free at 1-800-772-1213, or call your local office at 1-866-563-3899. We can answer most questions over the phone. If you are deaf or hard of hearing, you may call our TTY number, 1-800-325-0778. You can also write or visit any Social Security office. The office that serves your area is located at:

SOCIAL SECURITY
605 W Washington Blvd
Chicago IL 60661

If you do call or visit an office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly when you arrive at the office.

Social Security Administration