No. \_\_\_\_

## IN THE

SUPREME COURT OF THE UNITED STATES

Derek N. Jarvis

(Your Name)

VS.

United States

-- RESPONDENT(S)

PETITIONER

DRIGINA

## 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):

U.S. Federal Court Of Claims

U.S. Federal Circuit Of Appeals

 $\Box$  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.

 $\Box$  Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

☐ The appointment was made und	er the following p	rovision	of law:
		$\left  \right\rangle$	RECEIVED
$\Box$ a copy of the order of appointment	t is appended. OFFICE OF THE OLERK SUPREME COURT, U.S.		JUL - 5 2022
		·X	OFFICE OF THE CLERK SUPREME COURT, U.S.
·	-	(9:	

(Signature)

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

Derek N. Jarvis \_\_\_\_\_, am the petitioner in the above-entitled case. In support of I. 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.

		e monthly am 12 months	ount during	Amount expe next month	cted
I AM UNEMPLOYED, I	HAVE	NO INCOME <b>You</b>	AND I AM DIS	SABLED You	Spourse
NO DISABILITY BENE	FITS		Spouse	rou	Spouse
Employment		\$O	\$	\$	\$
Self-employment		\$	\$	\$	\$
Income from real proper (such as rental income)		\$	\$	\$	\$
Interest and dividends		\$	\$	\$	\$
Gifts		\$	\$	\$	\$
Alimony		\$	\$	\$	\$
Child Support		\$	\$	\$	\$
Retirement (such as soc security, pensions, annuities, insurance)	sial	\$	\$	\$	\$
Disability (such as socia security, insurance pay		\$ <u> </u>	\$	. \$	\$
Unemployment payment	S	\$	\$	\$	\$
Public-assistance (such as welfare)		\$	\$	\$	\$
Other (specify):		\$	\$	\$	\$
Total monthly inc	come:	\$	\$	\$	\$

I HAVE NO SPOUSE

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	Gross monthly pay
UNEMPLOYED	NO INCOME SINCE 2007	Employment	\$
			\$
			\$

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
			\$
	······································		\$
			Ψ

Type of account (e.g., checking or savings)	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	□ Other real estate
Value	Value
☐ Motor Vehicle #1	□ Motor Vehicle #2
Year, make & model	Year, make & model
Value	Value
□ Other assets	
Description	
Value	

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
INSNE	\$	\$
	\$	\$
	\$	\$

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 No spouse	Relationship	Age
	······································	

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.

I HAVE NO INCOME UNEMPLOYED DISABLED NO BENEFITS	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home) Are real estate taxes included?	\$	\$
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$	\$
Home maintenance (repairs and upkeep)	\$	\$
Food	\$	\$
Clothing	\$	\$
Laundry and dry-cleaning	\$	\$
Medical and dental expenses	\$	\$

I AM UNEMPLOYED NO INCOME DISABLED NO BENEFITS

Transportation (not including motor vehicle payments)
Recreation, entertainment, newspapers, magazines, etc.

\$ $\widehat{\mathbf{D}}$
$\tilde{\mathbf{C}}$
\$

Your spouse

\$\_\_\_\_\_

\$

You

Insurance (not deducted from wages or included in mortgage payments)

Homeowner's or renter's	\$ \$
Life	\$ \$
Health	\$ \$
Motor Vehicle	\$ \$
Other:	\$ \$

Taxes (not deducted from wages or included in mortgage payments)

(specify):	\$ \$
Installment payments	
Motor Vehicle	\$ \$
Credit card(s)	\$ \$
Department store(s)	\$ \$
Other:	\$ \$
Alimony, maintenance, and support paid to others	\$ \$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ \$
Other (specify):	\$ \$
Total monthly expenses:	\$ \$

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

TYes TNO

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, including the completion of this form? 
Yes Xo

If yes, how much?

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

- 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? \_\_\_\_\_

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

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

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

, 20 22 Executed on:

(Signature)