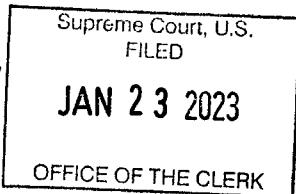


No. 22-6648

IN THE
SUPREME COURT OF THE UNITED STATES

Glen Plourde — PETITIONER
(Your Name)

VS.



Redington Fairview General Hospital, et al. — 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):

Federal District Court (ME), First Circuit Court of Appeals.

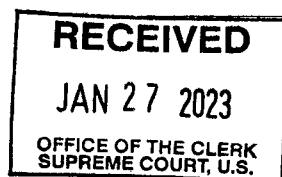
Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

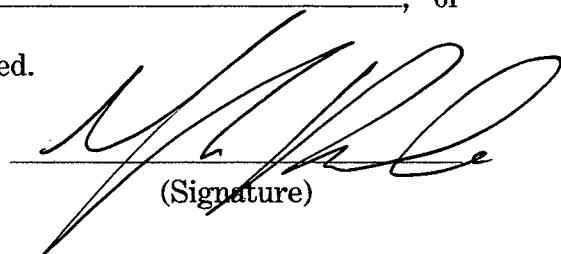
Petitioner's affidavit or declaration in support of this motion is attached hereto.

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, Glen Plourde, 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>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Self-employment	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Interest and dividends	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Gifts	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Alimony	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Child Support	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Unemployment payments	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>NA</u>	\$ <u>0</u>	\$ <u>NA</u>
Other (specify): <u>Parental Assistance</u>	\$ <u>*</u>	\$ <u>NA</u>	\$ <u>*</u>	\$ <u>NA</u>
Total monthly income:	\$ <u>*</u>	\$ <u>NA</u>	\$ <u>*</u>	\$ <u>NA</u>

* Please see attached Declaration

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
None	NA	NA	\$ NA
"	"	"	\$ "
"	"	"	\$ "

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
NA	NA	NA	\$ NA
"	"	"	\$ "
"	"	"	\$ "

4. How much cash do you and your spouse have? \$ ~100.00

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
Checking	\$ 67.82	\$ NA
NA	\$ NA	\$ NA
NA	\$ NA	\$ NA

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

Home

Value NA

Other real estate

Value NA

Motor Vehicle #1

Year, make & model 2015 Toyota Corolla

Motor Vehicle #2

Year, make & model _____

Value ~8000.00

Value _____

Other assets

Description None

Value NA

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>NA</u>	\$ <u>NA</u>
<u>"</u>	\$ <u>"</u>	\$ <u>"</u>
<u>"</u>	\$ <u>"</u>	\$ <u>"</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>	<u>NA</u>	<u>NA</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>NA</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>NA</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>NA</u>
Food	\$ <u>0</u>	\$ <u>NA</u>
Clothing	\$ <u>0</u>	\$ <u>NA</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>NA</u>
Medical and dental expenses	\$ <u>25.00</u>	\$ <u>NA</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0	\$ NA
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ NA
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ NA
Life	\$ 0	\$ NA
Health	\$ 0	\$ NA
Motor Vehicle	\$ 65.00	\$ NA
Other: NA	\$ 0	\$ NA
Taxes (not deducted from wages or included in mortgage payments)		
(specify): None	\$ 0	\$ NA
Installment payments		
Motor Vehicle	\$ 0	\$ NA
Credit card(s)	\$ 0	\$ NA
Department store(s)	\$ 0	\$ NA
Other: _____	\$ 0	\$ NA
Alimony, maintenance, and support paid to others	\$ 0	\$ NA
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ NA
Other (specify): MS office License	\$ 10.00	\$ NA
Total monthly expenses:	\$ 100.00	\$ NA

* Please see attached Declaration

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.

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? NA

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

NA

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? NA

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

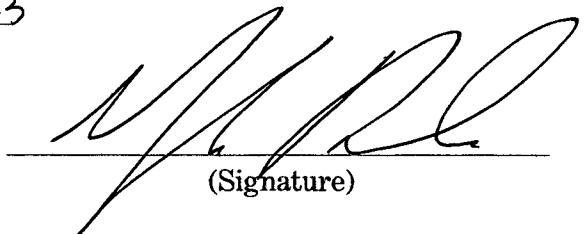
NA

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

* Please See Attached Declaration.

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

Executed on: 01/21, 2023



(Signature)

**Supplemental Declaration in support of the Petitioner's Motion to Proceed
*In Forma Pauperis***

The Petitioner has no income whatsoever and lives with his elderly parents, who are both retired and live on a fixed income. Petitioner's parents pay all of his living expenses.

Petitioner's parents allow the Petitioner to maintain a small checking account, to which they make occasional deposits of their own savings and at their own discretion (i.e. not owed money to the Petitioner or earned income by the Petitioner; discretionary financial assistance that is subject to cease at any time and for any reason), in order for the Petitioner to pay some bills that are directly associated with himself (car insurance, medical bills, software license) and to allow the Petitioner to build, maintain, and/or mitigate damage to his Credit History and Credit Report.

The Petitioner's parents make these deposits at their own discretion and at an irregular frequency, usually after the petitioner alerts them that his account will be overdrawn if he attempts to pay one of the bills described above. Petitioner receives from his parents just enough assistance to cover the personal bills described above, and only the personal bills described above, and no more.

Petitioner estimates he receives approximately \$100 - \$150 a month from his parents, which is less than the petitioner was receiving from his parents during the years 2020 and 2021. Petitioner's parents themselves directly pay for the rest of the Petitioner's basic living expenses (food, clothing, utilities, etc.).

If the Petitioner's parents did not provide the basic support described above, the Petitioner would literally have no money whatsoever and no place to live at all. Thus the Petitioner survives only due to the grace of his Parents.

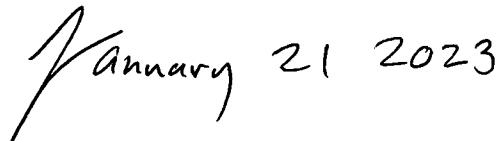
The Petitioner's parents review his bank statements and his bills at their will in exchange for the assistance they provide and adjust their financial assistance to the Petitioner as they see fit, which usually leaves the Petitioner with just enough money to pay his bills. As an example of their frugality, the Petitioner has been chastised by his parents for tipping for a haircut, which is a common practice.

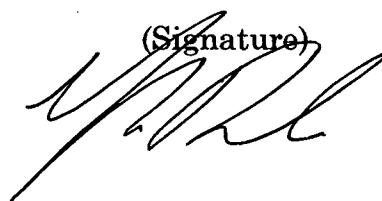
The Petitioner has been found by The Maine State Court(s) to be indigent in every single case he has been forced to defend himself in since 2016, which are abnormally numerous,¹ until recently in 2020 by the Maine Superior Court when the Petitioner began filing cases as a Plaintiff.²

The Petitioner has also been found to be Indigent ("In Forma Pauperis") in every case he has ever filed for Indigency Status in The Federal District Court of Maine,³ as well as his Appeals to the First Circuit and U.S. Supreme Court.

I attest under penalty of Perjury that the Foregoing is true and accurate.
Respectfully Submitted,

Executed on

January 21 2023


(Signature)

¹ NEWDC-CR-16-20309, PENDC-CR-16-20309, NEWDC-PA-16-0103, WATDC-PA-18-0329, WATDC-SA-18-377, WATDC-SA-18-383, KENDC-CR-18-20309, KENDC-CR-18-21183, PEN-18-458, KEN-18-479, AUGSC-AP-18-0069, AUGSC-AP-19-0020, BANSC-AP-19-0011, BANSC-AP-19-0012, PEN-19-514, KEN-20-217, KEN-20-257.

² SKOSC-CV-20-0006, BANSC-CV-20-0017, BANSC-CV-20-0055.

³ 1:19-cv-0486-JAW, 2:19-cv-0532-JAW, 1:20-cv-0011-JAW, 1:20-cv-0043-JAW, 1st Cir. 20-1610, 1st Cir. 20-1611, 1st Cir. 20-1777, 1st Cir. 20-2166, 1st Cir. 21-1565.