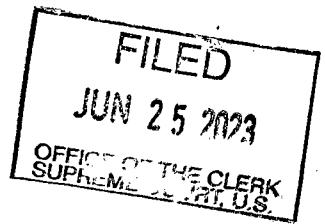


23-5516
No. _____

ORIGINAL



IN THE
SUPREME COURT OF THE UNITED STATES

ANGELA JANE JOHNSON AND
AUDREY JOHNSON-DUNCAN — PETITIONER
(Your Name)

USA C/O SOLICITOR VS.
GENERAL OF THE UNITED STATES,
BEGINNING W/ (UNITED STATES) — RESPONDENT(S)
COURT OF APPEALS FOR THE
SIXTH CIRCUIT (SILER, COLE, DAVIS), ET AL.
MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS* (Hardship)

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*. (Hardship)

Please check the appropriate boxes:

Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

UNITED STATES FEDERAL CLAIMS COURT (A DIFF CASE)

SUPREME CT OF UNITED STATES (A DIFF CASE)

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.

Angela Jane Johnson
(Signature)

Petitioner Pro Se

Ex Ap for AGD (see next page)
C. A. D. Attorney

PNTN Manager

From: Angela Johnson <angelajane_2002@yahoo.com>
Sent: Friday, June 23, 2023 4:09 PM
To: PNTN Manager; PNTN Assistant
Subject: [EXTERNAL] Fw: Appeal Nationwide Case To Supreme Court

----- Forwarded Message -----

From: audreyangeljd@yahoo.com <audreyangeljd@yahoo.com>
To: Angela Johnson <angelajane_2002@yahoo.com>
Sent: Friday, June 23, 2023 at 04:02:49 PM CDT
Subject: Re: Appeal Nationwide Case To Supreme Court

I cannot sign it at the moment, since I am unable to access a printer at the moment. You have my permission to sign for me. Thank you.

On Friday, June 23, 2023 at 03:49:52 PM CDT, Angela Johnson <angelajane_2002@yahoo.com> wrote:

I need you to sign and pdf back or consent to petition for me to sign for you, since you are out of town and this document is due right away.

Angela Jane Johnson
24 Revere 13
Jackson, TN 38305
731-513-0975

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

I, Angela Johnson, 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
Self-employment <i>Home Health Care/Phlebot.</i>	<u>Unpaid p.d.</u> \$ <u>Wages</u>	\$ <u>N/A</u>	\$ <u>5 yrs. past intervals</u>	\$ <u>N/A</u>
Self-employment	\$ <u>Cosmetology</u>	\$ <u>\$1000</u>	\$ <u>Unpaid</u>	\$ <u></u>
Income from real property (such as rental income)	\$ <u></u>	\$ <u></u>	\$ <u>Need</u>	\$ <u></u>
Interest and dividends	\$ <u>N/A</u>	\$ <u></u>	\$ <u>Insurance</u>	\$ <u></u>
Gifts	\$ <u>N/A</u>	\$ <u></u>	\$ <u>OPTAN</u>	\$ <u></u>
Alimony	\$ <u>N/A</u>	\$ <u></u>	\$ <u>for collection</u>	\$ <u></u>
Child Support <i>(Unpaid, Uncorrected)</i>	\$ <u>≤ 1600</u>	\$ <u></u>	\$ <u>Medicare</u>	\$ <u></u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>N/A</u>	\$ <u></u>	\$ <u>billing</u>	\$ <u></u>
Disability (such as social security, insurance payments)	\$ <u>N/A</u>	\$ <u></u>	\$ <u></u>	\$ <u></u>
Unemployment payments	\$ <u>N/A</u>	\$ <u></u>	\$ <u></u>	\$ <u></u>
Public-assistance (such as welfare)	\$ <u>N/A</u>	\$ <u></u>	\$ <u></u>	\$ <u></u>
Other (specify): <i>Loans?</i>	\$ <u>Not income</u>	\$ <u></u>	\$ <u></u>	\$ <u></u>
Total monthly income:	\$ <u>1000</u>	\$ <u></u>	\$ <u>4000</u>	\$ <u></u>

↑ *Expenses*
\$ 3000
per month
billed

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
Freelance Lic. Cosmetologist	Mobile	2008 - current	\$ 100 + tips
Freelance Home Health Care Drs. / Tr/Cert. Phlebotomist	24 Revenue 3 Jackson TN 38305	2018 - curr	\$ 3000 + bonuses
By JMC GHT, Past Employer		ent	

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
N/A			\$
			\$
			\$

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

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	\$ < \$100	\$ N/A
Savings	\$ < \$100	\$
Savings	\$ < \$100	\$
Savings	\$ < \$200	\$ 1
Savings	\$ < \$100	

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 _____
Value _____

Purchasing

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
Medicare/Palm. GBA	\$ 192,000	\$ <u>NA</u>
CMSHHS	\$ 88K + \$ 65K	\$ <u>1</u>
SBA (PPP & EIDL)	\$ 30K	\$ <u>1</u>
IRS (Ref. & Frontline Pandemic Defense \$ 25K)		\$ <u>1</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
Andrey Johnson-Duncan	Daughter	21 (college st. FAFSA dep.)

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)	\$ 1000 - 2000	\$ <u>NA</u>
Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>Inc. In Rent</u>	
Home maintenance (repairs and upkeep)	\$ <u>100 est.</u>	
Food	\$ <u>400 est.</u>	
Clothing	\$ <u>200 est.</u>	
Laundry and dry-cleaning	\$ <u>50 est.</u>	
Medical and dental expenses	\$ <u>200 est.</u>	

Phones

\$ 50 - 100

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 200 less	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ 150	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	Usually	\$ 10-20
Life	Usually	\$ 10-20
Health	Usually	\$ 350
Motor Vehicle	Usually	\$ 100 or less
Other:	Annual	\$ 175
Taxes (not deducted from wages or included in mortgage payments)		
(specify):	I Don't Own IRS	\$ _____
Installment payments		
Motor Vehicle	\$ N/A	\$ _____
Credit card(s)	\$ N/A	\$ _____
Department store(s)	\$ N/A	\$ _____
Other:	\$ N/A	\$ _____
Alimony, maintenance, and support paid to others	\$ N/A	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	~ 100 X 2	\$ _____
Other (specify):	Charitable Cont.	\$ 20% of filing
Total monthly expenses:	\$ 3600	

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.

Going back to school premed for med school w/ BSBA
Caponi College Student psych major & emp

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? _____

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

Assume costs through

Shorten
to help
cover
College
tuition
inflation

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? _____

Assume
pen
See
Costs through

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 have been denied justice & my
rights to pandemic assistance to
jumpstart/restart SBA businesses?

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

Executed on: June 24, 2023

Complaining

& to Sue Green
& Wentz House

Angel Johnson

I have been delayed Plaintiff, Prof
wages bound to Midcar. Am ~~1/2~~ 1/4 JD
rebot money.

(Signature)

COP Plaintiff/Defendant
Dover (Sealed Page)