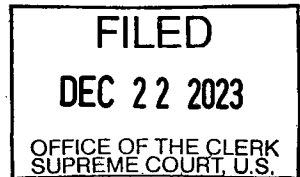


No. 23 - 6376



IN THE
SUPREME COURT OF THE UNITED STATES

JUDY THORPE,

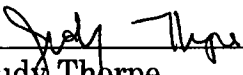
Plaintiff-Petitioner,

STATE OF NEW JERSEY, DEPARTMENT
OF TREASURY
DIVISION OF PENSIONS AND BENEFITS
Defendants-Respondents.

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The Petitioner, Judy Thorpe, asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

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



Judy Thorpe
Pro Se Petitioner
102 Harbor Circle
Freehold, New Jersey 07728
Phone: 1.732.580.2641
Email: nursejudymae@aol.com

ORDER ON MOTION

JUDY THORPE
V.
STATE OF NEW JERSEY, DEPARTMENT
OF TREASURY
DIVISION OF PENSIONS AND
BENEFITS

SUPERIOR COURT OF NEW JERSEY
APPELLATE DIVISION
DOCKET NO. A-000689-20T2
MOTION NO. M-002094-21
BEFORE PART E
JUDGE(S): CARMEN MESSANO

MOTION FILED: 12/15/2021

BY: JUDY THORPE

ANSWER(S)
FILED:

SUBMITTED TO COURT: January 06, 2022

ORDER


THIS MATTER HAVING BEEN DULY PRESENTED TO THE COURT, IT IS, ON THIS
6th day of January, 2022, HEREBY ORDERED AS FOLLOWS:

MOTION BY APPELLANT

MOTION FOR RECONSIDERATION OF THE
COURT ORDER FILED DECEMBER 10,
2021, WHICH DENIED APPELLANT'S
MOTION TO PROCEED AS AN INDIGENT GRANTED

SUPPLEMENTAL:

FOR THE COURT:


CARMEN MESSANO, P.J.A.D.

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

I, Judy Thorpe, 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>NA</u>
Self-employment	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>
Interest and dividends	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>
Gifts	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>
Alimony	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>
Child Support	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0?</u>	\$ <u>NA</u>	\$ <u>2</u>	\$ <u>NA</u>
Disability (such as social security, insurance payments)	\$ <u>2,720</u>	\$ <u>NA</u>	\$ <u>2,720</u>	\$ _____
Unemployment payments	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ _____
Other (specify): _____	\$ <u>0</u>	\$ <u>NA</u>	\$ _____	\$ _____
Total monthly income:	\$ <u>2,720</u>	\$ <u>NA</u>	\$ <u>2,720</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
NA	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? \$ _____
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	\$ 700.00	\$ 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 300,000

☐ Other real estate

Value _____

☒ Motor Vehicle #1

Year, make & model 2002 Mercedes

Value \$150.00 (one hundred fifty dollars)
Salvage Title...

☐ Motor Vehicle #2

Year, make & model _____

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

Unsure

\$?

\$

\$

\$

\$

\$ NA

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

NA

NA

NA

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)

Are real estate taxes included? ☒ Yes ☐ No

Is property insurance included? ☒ Yes ☐ No

\$ 914.13
Plus Fee 9750
total of 21.63

\$ NA

Utilities (electricity, heating fuel,
water, sewer, and telephone)

\$ Varies \$400.00 \$ NA

Home maintenance (repairs and upkeep)

Home owners
Association Fee
\$ 266.00 \$ NA
Plus Fee 10 ↑

Food

\$ 450.00 \$ NA

Clothing

\$ can not afford \$ NA

Laundry and dry-cleaning

\$ 200.00 \$ NA

Medical and dental expenses

\$ can not afford Dentist \$ NA
Medicare No
Secondary

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>400.00</u>	\$ <u>NA</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ _____	\$ <u>NA</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ <u>NA</u>
Life	\$ <u>60.00?</u>	\$ <u>NA</u>
Health	\$ <u>170.00?</u> <u>Medicare</u>	\$ <u>NA</u>
Motor Vehicle repair	\$ <u>1,900?</u> <u>November 2023 only</u>	\$ <u>NA</u>
Other: <u>unforeseen Home Repairs, windows needed, new carpet, front door, garage door</u>	\$ _____	\$ <u>NA</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ <u>NA</u>
Installment payments		
Motor Vehicle	\$ _____	\$ <u>NA</u>
Credit card(s)	\$ <u>846.00</u>	\$ <u>NA</u>
Department store(s)	\$ _____	\$ <u>NA</u>
Other: <u>I owe \$4,500 approximately to re-pay friend regarding escrow shortage</u>	\$ _____	\$ <u>NA</u>
Alimony, maintenance, and support paid to others	\$ _____	\$ <u>NA</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ <u>NA</u>
Other (specify): <u>Motor Vehicle Insurance</u>	\$ <u>267.75</u>	\$ <u>NA</u>
Total monthly expenses:	\$ _____	\$ <u>NA</u>

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.

Pending
litigation

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? unsure

Pending

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

litigation

I need a Pension Lawyer and Eldercare lawyer

they are very expensive. If I have to I will pay monthly. However, no lawyer will take my case

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

without all money upfront,

If yes, how much? see above unforeseen legal expenses, example

I do not have computer. I travel to library to use computer and printers. Staples, copy fees related to binder etc. Gas is very expensive.

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

I Do not Deserve to lose my 25 year Pension...

Sometimes I Hire Drivers

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

My self-representation has come with it's challenges including legal expenses due to on-going litigation, my pro se status, indigent and unrepresented, my existing ADA-recognized medical condition of vigorous Achalasia and esophageal stricture and their related medical symptoms; unforeseen legal expenses example staples. I seek understanding of these above circumstances.

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

Executed on: December 12th, 2023

Judy Thayer
(Signature)