No. <u>23M58</u>
<u> </u>
IN THE
SUPREME COURT OF THE UNITED STATES
SCHMMI COUNT OF THE CIVILED STATES
Paul Wright — PETITIONER
(Your Name)
VS. Denis McDonough,
Secretary of Veterans Affairs — 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 <i>in forma pauperis</i> .
Please check the appropriate boxes:
Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):
Court of Appeals for Veterans Claims
Court of Appeals for the Federal Circuit
☐ Petitioner has not previously been granted leave to proceed <i>in forma</i> 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)
(Signature)

23M58

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

I, Paul Wylght, 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	ルA Spouse	You	<i>NA</i> Spouse
Employment	\$ 1,187	\$	\$ 940	\$
Self-employment	\$	\$	\$	\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ 1,965	\$	\$ 2,083	\$
Disability (such as social security, insurance payments	\$ 572	\$	\$_566	\$
Unemployment payments	\$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	\$	\$	\$	\$
Total monthly income:	\$ 3,724	\$	\$ 3,609	\$

CompageSouth	Address Walterboro SC	Dates of Employment	Gross monthly pay
CompassSouth	vvaluerboro GC	6/22 - present	s varies by works
3. List your spouse's (Gross monthly page)	employment history for is before taxes or other	or the past two years, er deductions.)	most recent employer first. A - estranged and separated
Employer	Address	Dates of	Gross monthly pay
State of Oregon	1	Employment	\$ unknown - NA
			\$ unknowly - NA
checking	d their values, which yehold furnishings.	\$ 65 \$ 5 \$ 65	Amount your spouse has NA owns. Do not list clothing
☐ Home	G	\Box Other real estate	<u>.</u>
Value		Value	
		,	
Motor Vehicle #1 Year, make & mode Value	el2010 Subaru Forester inoperable engine	YMotor Vehicle #2 Year, make & mo Value	odel2013 Subaru Forester

6. State every person, bus amount owed.	siness, or organizatio	n owing you o	r your spous	se money, and the
Person owing you or your spouse money	Amount owed to		Amount owe	d to your spouse
Secretary of VA	s to be det	crined	\$	
-	\$		\$	
; <u></u>	\$	_	\$	
7. State the persons who reinstead of names (e.g. "J.	ly on you or your spou S." instead of "John S	se for support.	For minor o	hildren, list initials
Name	Relations	•	Age	
Jill G. Wright	Estranged spouse, living in Oregon	separated	65	
		You	Υ	our spouse
Rent or home-mortgage pay (include lot rented for mobil	ment e home)	You \$ 95		our spouse
Are real estate taxes included in the second second in the second				
Utilities (electricity, heating water, sewer, and telephone		\$ 30	* O \$	21
Home maintenance (repairs	and upkeep)	_{\$} 5	\$	·
Food		\$_30	<u>O</u> \$	
Clothing		\$	\$	<u>r</u>
Laundry and dry-cleaning		\$	\$	
Medical and dental expenses		¢ 10	6 6	

	You	NA Your spouse
Transportation (not including motor vehicle payments)	\$ 200	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 200	\$
Insurance (not deducted from wages or included in mortg	gage payments)	
Homeowner's or renter's	\$ 25	\$
Life	\$	\$
Health	\$ 147	\$
Motor Vehicle	\$_70	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage	payments)	
(specify): IRS greatorly estimate	\$ 100	\$
Installment payments		
Motor Vehicle	\$ 260	\$
Credit card(s)	\$	\$
Department store(s)	\$	\$
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$_1,000	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses:	\$ 3,752	\$

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
	I expect the Secretary of Veterans Affairs to pay the disability compensation that is being unlawfully withheld as I have proven in my pleadings the courts below have refused to hear.
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:
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 y	ves, state the person's name, address, and telephone number:
I li re: pr	Provide any other information that will help explain why you cannot pay the costs of this case. ive month-to-month on limited income. I have earned a license as an apprentice appraiser of commercial al estate; I work as I am able, but disabilities substantially limit my earning capacity. To pay filing fees and inting costs in this case, I would have to take away from my only "discretionary" spending categories, Food Recreation, at risk to my health.
I de	eclare under penalty of perjury that the foregoing is true and correct.
Exe	ecuted on: March 26, 2024
	Coul Wighte (Signature)

IN THE

SUPREME COURT OF THE UNITED STATES

PAUL WRIGHT,

Petitioner,

v.

DENIS McDonough, Secretary of Veterans Affairs,

Respondent.

PROOF OF SERVICE

I, Paul Wright, do declare that on this date, March 27, 2024, as required by Supreme Court Rule 29.5(c) I have serve the enclosed MOTION TO PROCEED IN FORMA PAUPERIS on both parties required to be served, by depositing an envelope containing the above documents in the United States Mail properly addressed to each of them and with first class postage prepaid. The names and addresses of those served are as follows:

Solicitor General of the United States Room 5616, Department of Justice 950 Pennsylvania Ave., N. W. Washington, DC 20530-0001

Jana Moses, Esq., for Secretary of Veterans Affairs U.S. Department of Justice Civil Division Commercial Litigation Branch - Washington, DC 1100 L Street, N.W., 9th Floor Washington, DC 20530

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

Executed on March 27, 2024

Paul Wright

RECEIVED APR - 3 2024

OFFICE OF THE CLERK SUPREME COURT U.S.