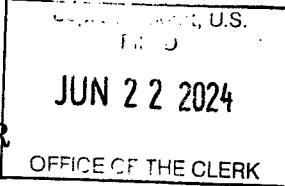


No. 23-7802

IN THE
SUPREME COURT OF THE UNITED STATES

FESTUS O. OHAN — PETITIONER
(Your Name)



VS.

AXOS BANK 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): U.S. DISTRICT COURT OF ALASKA
IN FAIRBANKS (see attached - next page).

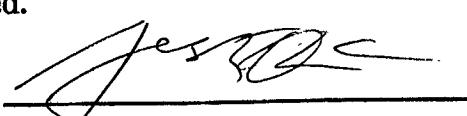
Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

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)

3

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

I, FESTUS O. ORTAN, 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	\$ 2500	\$ 00	\$ 670	\$ 00
Self-employment	\$ 00	\$ 00	\$ 00	\$ 00
Income from real property (such as rental income)	\$ 00	\$ 00	\$ 00	\$ 00
Interest and dividends	\$ 00	\$ 00	\$ 00	\$ 00
Gifts	\$ 00	\$ 00	\$ 00	\$ 00
Alimony	\$ 00	\$ 00	\$ 00	\$ 00
Child Support	\$ 00	\$ 00	\$ 00	\$ 00
Retirement (such as social security, pensions, annuities, insurance)	\$ 600	\$ 00	\$ 670	\$ 00
Disability (such as social security, insurance payments)	\$ 00	\$ 00	\$ 00	\$ 00
Unemployment payments	\$ 00	\$ 00	\$ 00	\$ 00
Public assistance (such as welfare)	\$ 00	\$ 00	\$ 00	\$ 00
Other (specify):	\$ 00	\$ 00	\$ 00	\$ 00
Total monthly income:	\$ 3670	\$ 00	\$ 670	\$ 00

(No Summer Jobs.)

	You	Your spouse
Transportation (not including motor vehicle payments)	<u>\$ 200⁰⁰</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	<u>\$ 50</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ _____	\$ _____
Health	\$ _____	\$ _____
Motor Vehicle	<u>\$ 130⁰⁰</u>	\$ _____
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ _____
Installment payments		
Motor Vehicle	<u>\$ 304⁰⁰</u>	\$ _____
Credit card(s)	<u>\$ 300⁰⁰</u>	\$ _____
Department store(s)	\$ _____	\$ _____
Other: <u>DEBTS</u>	<u>\$ 100⁰⁰</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	<u>\$ 61</u>	\$ _____
Other (specify): <u>COURT COSTS</u>	<u>\$ 385</u>	\$ _____
Total monthly expenses:	<u><u>\$ 2400</u></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.

AS AN ANCHORAGE SCHOOL DISTRICT SUBSTITUTE
TEACHER, I DO NOT WORK NOR RECEIVE PAY DURING THE
SUMMER. I WILL RESUME WORK ON AUGUST 16, 2024 IF I AM
STILL HEALTHY ENOUGH.

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 CANNOT AFFORD
AN ATTORNEY.

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? ~\$385/MONTH ON MULTIPLE CASES

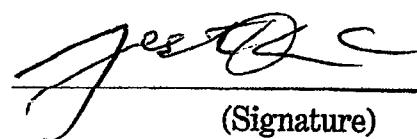
If yes, state the person's name, address, and telephone number:

OFFICE DEPO IN ANCHORAGE — MULTIPLE OFFICES — I USE
THEIR SELF SERVICE AND SOMETIMES STAFF TIME.

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

I AM BARELY SURVIVING FINANCIALLY. ANCHORAGE
SCHOOL DISTRICT IS ONLY PAYING ME \$175 PER DAY WHEN
I WORK AND AS OF NOW, I AM PART TIME EMPLOYEE AND
DO NOT GET PAID WHEN SCHOOLS ARE ON SESSIONS, HOLIDAYS
AND SUMMER. AT AGE 68, MY HEALTH IS DEPRECIATING RAPIDLY.
I declare under penalty of perjury that the foregoing is true and correct.

Executed on: JUNE 19th, 2024



(Signature)