

154 (R)

23-7819

No. _____

FILED

MAY 23 2024

OFFICE OF THE CLERK
SUPREME COURT, U.S.

ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

John Raglan — PETITIONER
(Your Name)

VS.

Judge Wilkinson Wynn and — RESPONDENT(S)
HARRIS (Circuit Judges)

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*.

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

United States Court of Appeals (4th Circuit)

☐ 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.

[Signature]
(Signature)

(A)

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

I, John Rabin, 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.

(Note: Because I can't Access my Funds in Debit Account)

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	\$ 0	\$ N/A	\$ 0	\$ N/A
Self-employment	\$ 0	\$ N/A	\$ 0	\$ N/A
Income from real property (such as rental income)	\$ 0	\$ N/A	\$ 0	\$ N/A
Interest and dividends	\$ 0	\$ N/A	\$ 0	\$ N/A
Gifts	\$ 0 N/A	\$ N/A	\$ 0	\$ N/A
Alimony	\$ 0	\$ N/A	\$ 0	\$ N/A
Child Support	\$ 0	\$ N/A	\$ 0	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ N/A	\$ 0	\$ N/A
Disability (such as social security, insurance payments)	\$ 0	\$ N/A	\$ 0	\$ N/A
Unemployment payments	\$ 0	\$ N/A	\$ 0	\$ N/A
Public-assistance (such as welfare)	\$ 0	\$ N/A	\$ 0	\$ N/A
Other (specify):	\$ 0	\$ N/A	\$ 0	\$ N/A
Total monthly income:	\$ 0	\$ N/A	\$ 0	\$ N/A

(2nd)

CB

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
WONS	N/A	N/A	\$ 60
			\$
			\$

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	N/A	N/A	\$ N/A
			\$
			\$

4. How much cash do you and your spouse have? \$ I HAVE EXCESS \$ million
Below, state any money you or your spouse have in bank accounts or in any other financial institution. IN BANKING ACCOUNTS, SPOUSE: N/A

Financial institution	Type of account	Amount you have	Amount your spouse has
Bank of America	Checking	\$ Excess \$ million	\$ N/A
Capital One	Checking/Savings	\$ 500,000	\$ N/A
S&W	Checking/Savings	\$ 200,000	\$ N/A

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

☒ Home
Value N/A

☒ Other real estate
Value N/A

☒ Motor Vehicle #1
Year, make & model N/A
Value _____

☒ Motor Vehicle #2
Year, make & model N/A
Value _____

☒ Other assets
Description Businesses, Property
Value N/A

(3rd)

(5)

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>\$ N/A</u>	<u>\$ N/A</u>	<u>\$ N/A</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.

Name	Relationship	Age
<u>Alister Rabin</u>	<u>son</u>	<u>18</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) Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>\$ N/A</u>	<u>\$ N/A</u>
Utilities (electricity, heating fuel, water, sewer, and telephone)	<u>\$ N/A</u>	<u>\$ N/A</u>
Home maintenance (repairs and upkeep)	<u>\$ N/A</u>	<u>\$ N/A</u>
Food	<u>\$ N/A</u>	<u>\$ N/A</u>
Clothing	<u>\$ N/A</u>	<u>\$ N/A</u>
Laundry and dry-cleaning	<u>\$ N/A</u>	<u>\$ N/A</u>
Medical and dental expenses	<u>\$ N/A</u>	<u>\$ N/A</u>

(14th)

(01)

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0.00</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0.00</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0.00</u>	\$ <u>N/A</u>
Life	\$ <u>0.00</u>	\$ <u>N/A</u>
Health	\$ <u>0.00</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>0.00</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>0.00</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>0.00</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>0.00</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>0.00</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0.00</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>0.00</u>	\$ <u>N/A</u>

(5th)

(F)

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? 100,000 I CAN ACCESS MONEY IN BANKING ACCOUNT

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

Attorney Retained Then & T.

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

N/A

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

I can't Access the Funds in All My Banking Accounts. I give the court permission to SEIZE the case from Accounts for petition

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

Executed on: 9/18/24, 2024

COUNTY OF Buchanan
STATE OF VIRGINIA
SUBSCRIBED AND SWORN TO BEFORE ME
THIS 21 DAY OF May, 2024
Jeffrey J. Arwood
NOTARY PUBLIC
MY COMMISSION EXPIRES 1-31-2026
The above notary public is not party to this action. ☒

Jeffrey J. Arwood
(Signature)
JEFFREY J. ARWOOD
NOTARY PUBLIC
Commonwealth of Virginia
Registration No. 8002606
My Commission Expires January 31, 2026

(6th)