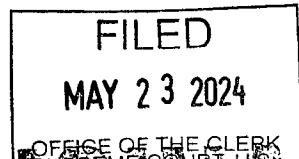


184 (R)

23-7810

No. \_\_\_\_\_



ORIGINAL

IN THE

SUPREME COURT OF THE UNITED STATES

John Ragn — PETITIONER  
(Your Name)

VS.

Judge Wilkinson Wynn AND — RESPONDENT(S)  
HARRIS (Circuit Judges)  
MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

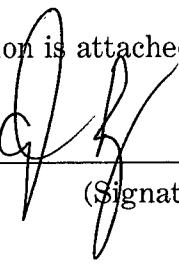
The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

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)

(A)

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

I, John Begin, 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 Bank of America)

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
<b>Total monthly income:</b>	<b>\$ 0</b>	<b>\$ N/A</b>	<b>\$ 0</b>	<b>\$ N/A</b>

(2nd)

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
WON'S	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
At N/A	At N/A	At N/A	\$ At N/A
			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 1 ~~1~~ Has ~~Excess~~ Excess \$ million  
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
Bank of America	Checking	\$ <del>1</del> <u>000,000</u>	\$ <u>0</u> <del>N/A</del>
Capital One	Checking/Savings	\$ <u>500,000</u>	\$ <u>0</u> <del>N/A</del>
S&P	Checking/Savings	\$ <u>100,000</u>	\$ <u>0</u> <del>N/A</del>

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

Home  
Value At N/A

Other real estate  
Value At N/A

Motor Vehicle #1  
Year, make & model At N/A  
Value \_\_\_\_\_

Motor Vehicle #2  
Year, make & model N/A  
Value \_\_\_\_\_

Other assets  
Description Businesses, Property  
Value At N/A

(3rd)

(C)

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>0 N/A</u>	\$ <u>21/2</u>	\$ <u>0 N/A</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
<u>Alvaro Ragon</u>	<u>Son</u>	<u>(18)</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)	\$ <u>0 N/A</u>	\$ <u>0 N/A</u>
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		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>0 N/A</u>	\$ <u>0 N/A</u>
Home maintenance (repairs and upkeep)	\$ <u>0 N/A</u>	\$ <u>0 N/A</u>
Food	\$ <u>0 N/A</u>	\$ <u>0 N/A</u>
Clothing	\$ <u>0 N/A</u>	\$ <u>0 N/A</u>
Laundry and dry-cleaning	\$ <u>0 N/A</u>	\$ <u>0 N/A</u>
Medical and dental expenses	\$ <u>0 N/A</u>	\$ <u>0 N/A</u>

(4th)

(00)

	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ <u>46</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>N/A</u>
Life	\$ <u>0</u>	\$ <u>N/A</u>
Health	\$ <u>0</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>0</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>0</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>N/A</u>
<b>Total monthly expenses:</b>	<b>\$ <u>0</u></b>	<b>\$ <u>N/A</u></b>

(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 My Accounts

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

Attorney Remained Then Yet.

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 My Accounts. I give the only information to  
they case from my accounts for petition  
Set 28

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

Executed on: 07/24/24, 2024

COUNTY OF Buckingham

STATE OF VIRGINIA

SUBSCRIBED AND SWORN TO BEFORE ME

THIS 21 DAY OF May, 2024

9/21/24  
 NOTARY PUBLIC

MY COMMISSION EXPIRES 1-31-2026

The above notary public is not party to this action.

(Signature)

JEFFREY J. ARWOOD
NOTARY PUBLIC
Commonwealth of Virginia
Registration No. 8002606
My Commission Expires January 31, 2026

(b)(6)