

23-7830
No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

Sally DIVERMAN TRA DIVERMAN
(Your Name) PETITIONER

VSSC
23-7830
ORIGINAL

FILED
MAY 23 2024
OFFICE OF THE CLERK
SUPREME COURT, U.S.

VS.
TRAVLO INS Co — 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):

MSSC/KC (PPO) MSSC/MC (Legal Fees) QUT
USDC EB NY 2016 CV 1064 (FIG) (PER) USDC
23-86 USCA1 23-86 163 (FP) OS19
☐ 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: NA

☐ The appointment was made under the following provision of law: _____

☐ a copy of the order of appointment is appended.

RECEIVED
JUN 28 2024
OFFICE OF THE CLERK
SUPREME COURT, U.S.

Sally Diverman
Appellant Pro Se
June 27, 2024

Cover F.P.

Sally Diverman
(Signature)
Appellant Pro Se
Sally Diverman

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

I, Sally DIVERMAN, 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>Retired</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Self-employment	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Income from real property (such as rental income)	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Interest and dividends	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Gifts	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Alimony	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Child Support	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ _____	\$ _____	\$ _____	\$ _____
Disability (such as social security, insurance payments)	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Other (specify): <u>SS</u>	\$ <u>1000</u>	\$ <u>1500</u>	\$ <u>1000</u>	\$ <u>1500</u>
Total monthly income:	\$ <u>1000</u>	\$ <u>1500</u>	\$ <u>1000</u>	\$ <u>1500</u>

FP 1/

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			\$
			\$
			\$

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 Retired			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 50K
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., <u>checking</u> or savings)	Amount you have	Amount your spouse has
	\$	\$
	\$	\$
	\$	\$

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

<input checked="" type="checkbox"/> Home Value 500K	<input type="checkbox"/> Other real estate Value NA
<input type="checkbox"/> Motor Vehicle #1 Year, make & model NA Value	<input type="checkbox"/> Motor Vehicle #2 Year, make & model NA Value
<input type="checkbox"/> Other assets Description NA Value	

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VSSC

FP PPO

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? _____

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

Rd Attys in 2016 CV 1064 (TG) (RER) USD EDPY Plus
NYSSC/MC 158600/1570819) Ofsego v. Diverman Inc. Sec
Michael Kanopke Melvin Berford 27 Bluff (810) NYC 10007 NY 380

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

NYCCPS V.D. 1126008/9/97 (11/20) to 2007 NYSCA
w. Judge Daniel J. RBOA HAD Legal fees x2
There is no Record of Case I Don't Believe that case
If yes, how much? WAS NECESSARY TLA FORMAN, Jeffrey Bluth, SAL
Lieber, AS@C

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

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

we paid atty x2 in NYSCA (104) 1126008/9/97 (11/20) + NO
CONCLUSION TO THAT CASE THINK CASE NOT NECESSARY.
Pd Judge 208K to Ofsego on summary judgment
158600/1570819) Rd \$20K - Se called Settlement 20600/106K
04/2017 D. J. T. Schout EMG or AW Rd 05/2017

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

Executed on: 07/06/14, 2014

and
Inc. Diverman
Pte. Co.
Affiliated

J/K

Sally Diverman
(Signature)

USD 1064 T.V.D. - & RK 110622 Settlement
158600/1570819) Ofsego 206-05/2017
(0819) NYSSC/MC sum judgment 04/2017
SALLY DIVERMAN
Affiliated Pte. Co.
Don 06/24/24
Sally Diverman

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

I, Sally DIVERMAN, 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>Retired</u>	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Self-employment	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Income from real property (such as rental income)	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Interest and dividends	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Gifts	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Alimony	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Child Support	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ _____	\$ _____	\$ _____	\$ _____
Disability (such as social security, insurance payments)	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>NA</u>	\$ _____	\$ <u>NA</u>	\$ _____
Other (specify): <u>SS</u>	\$ <u>1000</u>	\$ <u>1500</u>	\$ <u>1000</u>	\$ <u>1500</u>
Total monthly income:	\$ <u>1000</u>	\$ <u>1500</u>	\$ <u>1000</u>	\$ <u>1500</u>

FP 1/

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			\$
			\$
			\$

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 Retired			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 50K
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., <u>checking</u> or savings)	Amount you have	Amount your spouse has
	\$	\$
	\$	\$
	\$	\$

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

☒ Home
Value 500K

☐ Other real estate
Value NA

☐ Motor Vehicle #1
Year, make & model NA
Value

☐ Motor Vehicle #2
Year, make & model NA
Value

☐ Other assets
Description NA
Value

FP 2

VSSC

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

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

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

\$ 6K RE \$ 6K RE

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

\$ 2K

\$ 2K

Home maintenance (repairs and upkeep)

\$ 600

\$ 600

Food

\$ 400

\$ 400

Clothing

\$ 200

\$ 200

Laundry and dry-cleaning

\$ 100

\$ 100

Medical and dental expenses

\$ 150

\$ 150

PPO

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USSC #

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 200-	\$ 200-
Recreation, entertainment, newspapers, magazines, etc.	\$ 200-	\$ 200-
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 2K-	\$ 2K-
Life	\$ _____	\$ _____
Health	\$ _____	\$ _____
Motor Vehicle	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>Property</u>	\$ 6K	\$ 6K
Installment payments		
Motor Vehicle	\$ NA	\$ NA
Credit card(s)	\$ 500-	\$ 500-
Department store(s)	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ NA	\$ NA
Other (specify): _____	\$ _____	\$ _____
Total monthly expenses:	\$ _____	\$ _____

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VSSC#