

No. 24-5202

ORIGINAL

FILED

MAY 23 2024

OFFICE OF THE CLERK
SUPREME COURT, U.S.

IN THE

SUPREME COURT OF THE UNITED STATES

James B. Jordan

— PETITIONER

(Your Name)

VS.

Greyhound Lines Inc

— 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):

US District Court of California
US District Court of Appeals 9th 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.

☐ 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.

James B. Jordan, BSW, MSW
(Signature)

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

I, James B. Jordan, 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>1000.00</u>	\$ <u>N/A</u>	\$ <u>300 weekly workers comp</u>	\$ <u>N/A</u>
Self-employment	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Gifts	\$ <u>Donations</u>	\$ _____	\$ <u>0</u>	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Child Support	\$ <u>0/N/A</u>	\$ _____	\$ <u>0</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>N/A</u>	\$ _____	\$ <u>0</u>	\$ _____
Disability (such as social security, insurance payments)	\$ <u>N/A</u>	\$ _____	\$ <u>0</u>	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>200.00 ended July 2024</u>	\$ _____	\$ <u>0</u>	\$ _____
Other (specify): <u>approximately 1200.00</u>	\$ _____	\$ _____	\$ <u>0</u>	\$ _____
Total monthly income:	\$ <u>1200.00</u>	\$ _____	\$ <u>approximately 1000.00</u>	\$ _____

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
Motel 6 (workers comp)	Laurel, MD	04/2024 - present	\$ 300.00 week (workers comp)
Social Worker	CPS Angeles, CA	2 weeks 2023	\$ 1100.00
Dish washer	Glendale, CA	2 weeks 2023	\$ 950.00 approximately

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 NO spouse			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 0
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., checking 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 N/A, Homeless ☐ Other real estate Value Homeless

☐ Motor Vehicle #1 Year, make & model 96 Chevy 4x4 wrecked Value Undriven ☐ Motor Vehicle #2 Year, make & model N/A Value

☐ Other assets Description Homeless due to terrorism, recently stabbed in face, head, ear cut off. Value

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
CA County District Attorney	\$ 50 million X 10	\$ N/A
CA County Sheriff's	\$ 50 million X 10	\$
Greyhound	\$ 20 million	\$

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
No spouse or children		

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)	\$ Homeless	\$ N/A
Are real estate taxes included? ☐ Yes ☐ No		
Is property insurance included? ☐ Yes ☐ No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$	\$
Home maintenance (repairs and upkeep)	\$ approximately	\$
Food	\$ 300-400 approximately	\$
Clothing	\$ 250-w etc.	\$
Laundry and dry-cleaning	\$ 100 week	\$
Medical and dental expenses	\$ medical	\$

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 250 week	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ Terrence Victim	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0 Homeless	\$
Life	\$ 0	\$
Health	\$ 0	\$
Motor Vehicle	\$ 160.00 month	\$
Other: fear for life outside everyday no place	\$	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify):	\$	\$
Installment payments		
Motor Vehicle	\$ N/A	\$
Credit card(s)	\$ N/A	\$
Department store(s)	\$ N/A	\$
Other: Living eating, bathing, car	\$ 400 week	\$
Alimony, maintenance, and support paid to others	\$ 0, N/A	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ N/A	\$
Other (specify): Not allowed to practice Social Work	\$ approximately	\$
Total monthly expenses:	\$ 1050.00	\$

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:

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:

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

Homeless and destitute, terrorized 24/7 by Government/Law Enforcement.
Don't have job, money (full time). Assaulted and attempted to be killed everyday.
Only took Greyhound due to (my) various vehicles being vandalized, etc.

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

Executed on: July 20, 2021

James B. Coulon, BSW, MSW
(Signature)