

No. 24-5850

ORIGINAL

IN THE  
SUPREME COURT OF THE UNITED STATES

Elizabeth Johnson — PETITIONER  
(Your Name)

FILED  
AUG 27 2024

OFFICE OF THE CLERK  
SUPREME COURT, U.S.

VS.

Shannon Blackwell — 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):  
\_\_\_\_\_  
\_\_\_\_\_

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.

*Elizabeth Johnson*  
RECEIVED  
(Signature)  
OCT 28 2024  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, Elizabeth Johnson, 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	\$ 0	\$ 0	\$ 0	\$ 0
Self-employment	\$ 0	\$ 0	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 0
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0/ waived	\$ 0	\$ 0/ waived	\$ 0
Disability (such as social security, insurance payments)	\$ 0	\$ 0	\$ 0	\$ 0
Unemployment payments	\$ 0	\$ 0	\$ 0	\$ 0
Public-assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0
Other (specify): <u>VA Compensation</u>	\$ 2658.91	\$ 0	\$ 2658.91	\$ 0
<b>Total monthly income:</b>	<u>\$ 2658.91</u>	<u>\$ 0</u>	<u>\$ 2658.91</u>	<u>\$ 0</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
N/A / NONE	N/A / NONE	N/A / NONE	\$ N/A / NONE
N/A / NONE	N/A / NONE	N/A / NONE	\$ N/A / NONE
N/A / NONE	N/A / NONE	N/A / NONE	\$ N/A / NONE

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 / NONE	N/A / NONE	N/A / NONE	\$ N/A / NONE
more person financials	1000-1000-1000-1000	Oct 10/2024	\$ N/A / NONE
N/A / NONE	N/A / NONE	N/A / NONE	\$ N/A / NONE

4. How much cash do you and your spouse have? \$ 0 / N/A

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
CHECKING	\$ 5.52	\$ N/A / NONE
SAVINGS	\$ 60.24	\$ N/A / NONE
NONE / N/A	\$ NONE / N/A	\$ N/A / NONE

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

Home

Value 136,724\*

Other real estate

Value 195,848\*

\* PER REDEFIN, 10/10/2024

Motor Vehicle #1

Year, make & model N/A / NONE

Value \_\_\_\_\_

Motor Vehicle #2

Year, make & model N/A / NONE

Value \_\_\_\_\_

Other assets

Description INVESTMENT ACCOUNTS

Value 25.38

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money

U.S. Army

None / N/A

None / N/A

Amount owed to you

\$ TBA BY DFAS

\$ 0

\$ 0

Amount owed to your spouse

\$ N/A

\$ N/A

\$ N/A

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

E.G.

Z.J.

Relationship

CHILD

CHILD

Age

9

3

8. Estimate the average monthly expenses of you and your family 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)

\$ 1156.04

ACCELERATED  
INVESTMENT  
N/A

Are real estate taxes included?  Yes  No  
Is property insurance included?  Yes  No

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

\$ 300

\$ N/A

Home maintenance (repairs and upkeep)

\$ 100

\$ N/A

Food

\$ 200

\$ 400

Clothing

\$ 150

\$ N/A

Laundry and dry-cleaning

\$ 60

\$ N/A

Medical and dental expenses

\$ 0

\$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 200	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 10	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ N/A
Life	\$ 40	\$ 31
Health	\$ 0	\$ 0
Motor Vehicle	\$ 0	\$ 0
Other: _____	\$ 0	\$ 0
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$ 0
Installment payments		
Motor Vehicle	\$ 0	\$ 0
Credit card(s)	\$ 69.02	\$ 0
Department store(s)	\$ 0	\$ 0
Other: _____	\$ 0	\$ 0
Alimony, maintenance, and support paid to others	\$ 0	\$ 0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ 0
Other (specify): <u>Spouse's monthly expenses due to his incapacitation</u>	\$ 431.00	\$ 0
<b>Total monthly expenses:</b>	<u>\$ 2716.06</u>	<u>\$ 431.00</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.

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.  
*INCARCERATED SPOUSE.*

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

Executed on: 20 October

, 2024

Elizabeth Johnson

(Signature)

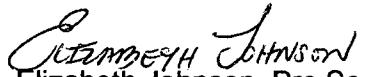
**Explanation for Question Number 9:**

Petitioner, Elizabeth Johnson, is a United States military retiree.

Petitioner was recently awarded retroactive Combat-Related Special Compensation (CRSC) and will receive future monthly payments.

The total amount owed and the total amount of the future monthly payments have not yet been determined by Defense Finance and Accounting Services (DFAS), who is currently processing the award.

Respectfully submitted,

  
Elizabeth Johnson, Pro Se  
Pétitionér

Signed: 10/20/2024

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

IN THE  
SUPREME COURT OF THE UNITED STATES

Aaron Johnson Jr. — PETITIONER  
(Your Name)

VS.

Shannon Blackwell — 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:

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\_\_\_\_\_  
\_\_\_\_\_

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.

Aaron Johnson Jr.

RECEIVED  
SUPREME COURT OF THE  
US POLICE OFFICE

2024 OCT -3 PM 12: 43

JG 504

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

I, AARON JOHNSON JR., 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
Employment	You <i>(INCARCERATED INDIVIDUAL)</i> \$ 0	Spouse \$ N/A
Self-employment	\$ 0	\$ N/A
Income from real property (such as rental income)	\$ 0	\$ N/A
Interest and dividends	\$ 0	\$ N/A
Gifts	\$ 0	\$ N/A
Alimony	\$ 0	\$ N/A
Child Support	\$ 0	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ N/A
Disability (such as social security, insurance payments)	\$ 0	\$ N/A
Unemployment payments	\$ 0	\$ N/A
Public-assistance (such as welfare)	\$ 0	\$ N/A
Other (specify): _____	\$ 0	\$ N/A
<b>Total monthly income:</b>	<b>\$ 0</b>	<b>\$ N/A</b>

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
NONE	NONE	NONE	\$ 0
NONE	NONE	NONE	\$ 0
NONE	NONE	NONE	\$ 0
MTC - PRISON INCARCERATED	MTC - HAGERSTOWN, MARYLAND	9/2024 - PRESENT	\$ 0

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

4. How much cash do you and your spouse have? \$ 0 / N/A

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
NONE	\$ 0	\$ N/A
NONE	\$ 0	\$ N/A
NONE	\$ 0	\$ N/A

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings. NONE / N/A

Home  
Value \_\_\_\_\_

Other real estate  
Value \_\_\_\_\_

Motor Vehicle #1  
Year, make & model \_\_\_\_\_  
Value \_\_\_\_\_

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

Other assets  
Description \_\_\_\_\_  
Value \_\_\_\_\_

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ N/A
Life	\$ 31	\$ N/A
Health	\$ 0	\$ N/A
Motor Vehicle	\$ 0	\$ N/A
Other: _____	\$ 0	\$ N/A
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$ N/A
Installment payments		
Motor Vehicle	\$ 0	\$ N/A
Credit card(s)	\$ 0	\$ N/A
Department store(s)	\$ 0	\$ N/A
Other: _____	\$ 0	\$ N/A
Alimony, maintenance, and support paid to others	\$ 0	\$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ N/A
Other (specify): _____	\$ 0	\$ N/A
<b>Total monthly expenses:</b>	<b>\$ 431.00</b>	<b>\$ N/A</b>

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.

INCARCERATED INDIVIDUAL.

PUBLIC DEFENDER ELIGIBLE + REPRESENTER IN UNRELATED MATTER. -- -

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

Executed on: October 2<sup>nd</sup>, 2024

Aaron Johnson Jr  
(Signature)