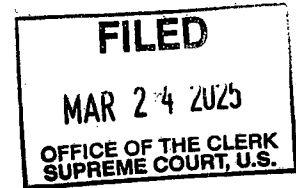


No. _____

ORIGINAL

24-7325



IN THE
SUPREME COURT OF THE UNITED STATES

Tracie L. Green — PETITIONER

vs.

US Bank National Association et al — RESPONDENT(S)

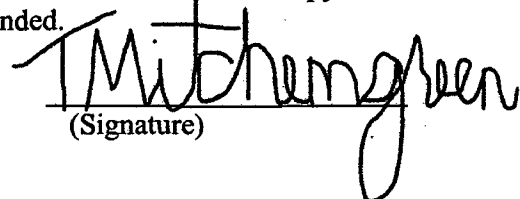
MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The petitioner asks for leave to file the attached petition for a writ of certiorari before judgment under Rule 11 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):

Lexington County Courthouse
South Carolina Court of Appeals
United States District Court of South Carolina
United States Court of Appeals for the Fourth Circuit

Petitioner affidavit or declaration in support of this motion is attached hereto. A copy of the order of appointment is appended.


(Signature)

Case #2022 CP3200784

Motion and Order/Affidavit to Proceed in Forma Pauperis

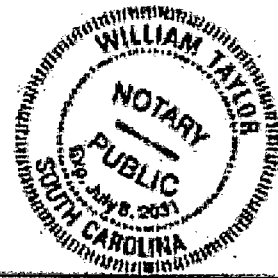
I, Tracie Mitchem-Green, being duly sworn, state that I am the Defendant and that I do not have the funds available to pay the costs of filing and service in this case. I request that motion hearing requests, form motions, and proposed order/consent orders be made without cost to me.


Tracie Mitchem-Green
Defendant

Sworn to before me this 3rd day of May, 2022


Notary Public of South Carolina

My Commission expires: July 8, 2031




ORDER

☒ Leave is granted to proceed in forma pauperis.

☐ Leave is denied to proceed in forma pauperis. This case will be dismissed without further order of the court if the filing fee and associated costs are not paid on or before _____
20____ (Family Court Only)

Date: MAY 11, 2022


Family Court Judge
Lexington County Judge

_____, S.C.

NOTICE TO PLAINTIFF: The Court may assess costs against either party at hearing.

Custodial Parent (if applicable): _____

SCCA 405F (12/2009)

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

I, Tracie L. Mitchem-Green, 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	\$6,057	\$0	\$7929	\$0
Self-employment	\$1	\$0	\$0	\$0
Income from real property (such as rental income)	\$0	\$0	\$0	\$0
Interest and dividends	\$1	\$0	\$0	\$0
Gifts	\$0	\$0	\$0	\$0
Alimony	\$0	\$0	\$0	\$0
Child Support (annual \$5280)	\$440	\$0	\$440	\$0
Retirement (such as social security, pensions, annuities, insurance)	\$167	\$0	\$0	\$0
Disability (such as social security, insurance payments)	\$0	\$0	\$0	\$0
Unemployment payments	\$0	\$0	\$0	\$0
Public-assistance (such as welfare)	\$204(SNAP)	\$0	\$23 (SNAP)	\$0
Other (specify): <u>Tax Refund/12months (same with retirement)</u>	\$404	\$0	\$112	\$0
Total monthly income:	\$7274	\$0	\$8504	\$0

*Column updated from June 7, 2024 submission

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
VNS Health	220 E 42 nd St, New York	12/22-Present	\$7929

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			\$
			\$
			\$

4. How much cash do you and your spouse have? \$500.00

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/Savings	\$ 1214.19/136.05	\$0
Checking/Savings	\$25.16/0.32	\$
Checking/Savings	\$29.09/50.00	\$
Savings/MMA	\$0.01/0.39	\$
Checking/Savings	\$0	\$
Checking	\$38.80	\$
Checking	\$305.88	\$

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

D Home
Value Being litigated

D Other real estate
Value NA

D Motor Vehicle #1
Year, make & model 2004 Toyota Sequoia
Value \$5000

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

D Other assets
Description Westgate Timeshare
Value \$19,000 [NOTE: See Writ of Certiorari to US District Court of South Carolina, No. 23M16, dated July 11, 2024 final, unsealed petition filed December 13, 2024]

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
CG	Son	18
_____	_____	_____
_____	_____	_____
_____	_____	_____

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)	\$In Homeless Shelter	\$NA _____
Are real estate taxes included? D Yes D No NA		
Is property insurance included? D Yes D No NA		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$315 _____	\$ _____
Home maintenance (repairs and upkeep)	\$113 (Westgate) _____	\$ _____
Food	\$255 _____	\$ _____
Clothing	\$200 _____	\$ _____
Laundry and dry-cleaning	\$100 _____	\$ _____
Medical and dental expenses	\$0 _____	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$400_____	\$_____
Recreation, entertainment, newspapers, magazines, etc.	\$100_____	\$_____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$being litigated_____	\$_____
Life	\$0_____	\$_____
Health	\$260_____	\$_____
Motor Vehicle	\$380_____	\$_____
Other: _____	\$0_____	\$_____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$0_____	\$_____
Installment payments		
Motor Vehicle	\$0_____	\$_____
Credit card(s)	\$600_____	\$_____
Department store(s)	\$0_____	\$_____
Other: <u>Retirement loan/*Personal loan(*unable, pay what I can)</u>	\$76/*400_____	\$_____
Alimony, maintenance, and support paid to others	\$0_____	\$_____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$0_____	\$_____
Other (specify): <u>Tithe and Offering(10% of income); this litigation(varies)</u>	\$310;\$200_____	\$_____
Total monthly expenses:	\$3709_____	\$_____

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

☒ D Yes ☐ D 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? ☐ D Yes ☒ D No

If yes, how much? _____

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

Unable to pay and cautious about additional derailment attempts as described in Writ of Certiorari to US District Court of South Carolina. **NOTE: I request attorney referrals but respectfully decline attorney appointments due to previous derailment experiences.**

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?

☐ D Yes ☒ D No

If yes, how much? ___I do have expenses related to document preparation and mailing. Approximately \$200+ monthly with both the State of South Carolina foreclosure case (No.2022CP3200784, US Bank vs Tracie Green, et al) and multiple federal court contacts/cases occurring simultaneously.

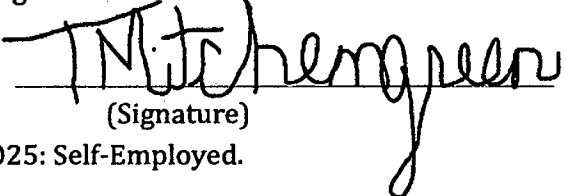
If yes, state the person's name, address, and telephone number: NA

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

Currently, I live in a Homeless Shelter. Due to terrorism experienced since 2017, I exited Nursing (direct patient care) to keep the public safe, which severely affected my finances. Now that the government has been made aware of the terrorism, the terrorist are less likely to hurt anymore of my patients. However, the targeting against me is intense (including previously high vehicle insurance, tampered legal mail, and interference with medical appointments and employment, etc). The terrorism, coupled with the suspected murderous attempt on my life [and my child if present] has taken a negative toll on my health and income, though I remain at functional capacity. [It is suspected the terrorist are responsible for the death of Cristopher Washington, and the targeting of his mother Donna Washington Farmer.] HELP IS REQUESTED TODAY. PLEASE NOTIFY THE DEPARTMENT OF JUSTICE.

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

Executed on March 25, 2025


(Signature)

April 2025: Notice of employment raise received. May 2025: Self-Employed.

Tracie Mitchem-Green

9. As allotted by the demands of the State of South Carolina foreclosure case (No. 2022CP3200784, US Bank National Association vs. Tracie L. Green, Palmetto Citizens Federal Credit, Cardinal Pines Homeowners Association; the US Court of Appeals for the Fourth Circuit (No 25-1169); and this Supreme Court case (No. pending), I desire to maintain my income. In addition, with the assistance of social services, I expect to locate an apartment.