No. ______________________

____

IN THE

SUPREME COURT OF THE UNITE☐ STATES

____

John Smith — PETITIONER

VS.

Lora J. Smith — 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):

Eleventh Circuit Court of the State of Missouri
Eighth Circuit Federal District Court

☐ 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: ____

☐ a copy of the order of appointment is appended.

____
(Signature)

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

I, John J. Smith , 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	$ N/a	N/a	N/a	$ N/a
Self-employment	$ 0	N/a	0	N/a
Income from real property (such as rental income)	$	$ N/a	$ 0	N/a
Interest and dividends	$	$ N/a	0	n/a
Gifts	$0	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)	$ 3562.83	N/A	$ 3562.83	N/A
Unemployment payments	$ N/A	$ N/A	$ N/A	$ N/A
Public-assistance (such as welfare)	$ N/A	$ N/A	$ N/A	$ N/A

Other (specify): ____	$ N/A___	$ N/A_____	$ N/A___	$ N/A__
Total monthly income:	$ 3562.83	N/a	$ 3562.83	$_N/a__

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			$
			$
			$

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 $
			$
			$

4. How much cash do you and your spouse have? $ 158.10
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
USBANK	Checking	$ 10.46	$ N/a
	Checking	$ 20.76	$ N/a
	Checking	$ 126.88	$ N/a

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

☐ Other real estate
Value N/a

☐ Motor Vehicle #1
Year, make & model N/a
N/a
Value

☐ Motor Vehicle #2
Year, make & model
Value

☐ Other assets
Description N/a
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
	$ 0	$ N/a
	$	$
	$	$

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

Name	Relationship	Age
Elizabeth Smith	Daughter (disabled)	29
Evangeline Murray	Granddaughter	11

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	$ 350.00	$ N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	$ 961.35	$ N/A
Home maintenance (repairs and upkeep)	$ 300	$ N/A
Food	$500	$ N/A
Clothing	$ 30	$ N/A
Laundry and dry-cleaning	$ 30	$ N/A
Medical and dental expenses	$ 150	$ N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	$ 144.22	$ N
Recreation, entertainment, newspapers, magazines, etc.	$ 50	$ N
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	$ 105	N/A
Life	$ 0	$ N/A
Health	$ 131	$ N/A
Motor Vehicle	$ 186	$ N/A
Other: ______	$ 0	$ N/A
Taxes (not deducted from wages or included in mortgage payments)		
(specify): Income Tax and personal property tax	$ 50	$ N/A
Installment payments		
Motor Vehicle	$ 0	$ N/A
Credit card(s)	$ 125.00	$ N/A
Department store(s)	$ N/A	$ N/A
Other: ______	$ N/A	$ N/A
Alimony, maintenance, and support paid to others	$ 950	$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	$ 0	$ N/A
Other (specify): ______	$ 0	$ N/A
Total monthly expenses:	$ 3514.57	$ ______

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? $50 (Transcripts estimated over time)

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

Robert Hull
Hull Reporting
834 Madison St, Saint Charles, MO 63301
(636) 946-1354

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

I am disabled and my income is fixed. I am caring for my daughter who is going through the disability process as well as her daughter age 11. There have been many times when I must choose between food or medication. My total net income per month is $2404 and I have a shortfall each month which I put on my $800 in credit cards. I have over $100,000 dollars owed to the government for taxes and penalties and I am working with the IRS to address this matter. The home I live in was purchased as is and requires much work. As the only income provider, these expenses fall to me. So far I have spent over $3,000 in required repairs including replacing the entire water system. I have also paid for materials for repair such as flooring, kitchen cabinets, roof repair and all utilities. This is over a three year period. If the Court denied this application, it will be an undue hardship for me to pay the costs associated with my Pro Se Petition for Certiorari as I have little to no discretionary income above and beyond my net income and have a negative net worth and insolvent.

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

Executed on: November 19, 2017

(Signature)