

No 16-15732-DD

IN THE
SUPREME COURT OF THE UNITED STATES

JOHN J. JACOBS, JR.---PETITIONER

VS.

EMILIO ESTEFAN. EN AL---RESPONDENT

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*

☒ petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

UNITED STATES DISTRICT COURT OF NEW JERSEY

UNITED STATES DISTRICT COURT OF SOUTHERN DISTRICT OF FLORIDA

UNITED STATES COURT OF APPEALS FOR THE THE ELEVENTH CIRCUIT

UNITED STATES SUPREME COURT

☐ Petitioner has not previously been leave to proceed *in forma paupers* in any other court

Petitioner's affidavit or declaration in support this motion is attached hereto.

DATE 4/4/18


JOHN J. JACOBS JR. PRO SE

AFFIDAVIT OR DECLARATION

IN SUPPORT OF MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

I, **JOHN J. JACOBS, JR.** am the petitioner in the above entitled case. in support of my motion to proceed *in forma pauperis*, state that because of my poverty I am unable to pay the costs of this case or give security therefor ; and I believe I am entitled to redress.

- 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, to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	Average monthly during the past 12 months		Amount expected next month	
	<u>You</u>	<u>Spouse</u>	<u>You</u>	<u>Spouse</u>
Employment	NA	NA	-----	0
Self- employment	NA	NA	-----	0
Income from real proper (such as rental income)	NA	NA	-----	0
Interests and dividends	NA	NA	-----	0
Gifts	NA	NA	-----	0
Alimony	NA	NA	-----	0
Child Support	NA	NA	-----	0
Retirement (such as social security, pensions annuities, insurance)	\$417.00	NA	-----	0
Disability (such as social security, insurance payments)	\$384.00	NA	-----	0
Unemployment	NA	NA	-----	0
Public-assistance	NA	NA	-----	0
(such as welfare)	\$16.00	NA	-----	0
Other(specify): food stamps				
Total monthly income;	\$ 791.00			

2. List your employment history for the two year, most first. (Gross monthly pay is before taxes or other deductions)

Employer	Address	Dates of Employment	Gross monthly pay
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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
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NA-----

4. How much cash do you and your spouse have? none

Below state any money you or your spouse have in the bank accounts or in any other financial

Financial institution	Type of account	Amount you have	Amount your spouse has
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NA-----

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

NA-----

House none

other real estate none

Motor Vehicle #1 none

Motor Vehicle#2 none

Other assets none

6. State every person business, or urbanization 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
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NA-----

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

Name	Relationship	Age
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NA-----

8. Estimate the average monthly expenses of you or your family. Show separately the amounts paid by your spouse. Adjust any payment that are made weekly biweekly, quarterly, or annually to show the monthly rate. NA

	You	Your spouse
Rent or home mortgage payment (include lot rented for mobile home)	NA-----	0
Are real estate taxes included?	NO	
Is property insurance included?	NO	
Utilities (electricity heating fuel, water sewer and telephone)	\$200.00 phone-----	0
Home maintenance (repair and upkeep)	NA-----	0
Food <u>Families First</u>	16..00 -----	0
Clothing	none-----	0
Laundry and dry cleaning	none-----	0
Medical and dental expenses	none-----	0
To the court I am on <u>MEDICARE</u>	none-----	0

	You	Your spouse
Transportation (not including motor vehicle payments)	NA-----	0----
Recreation, entertainment, newspaper, magazines,etc.	NA-----	0----
Insurance (not deducted from wages or included in mortgage payment)		
Homeowner's or renter's	NA-----	0----
Life	NA-----	0----
Health	NA-----	0----
Motor vehicle	NA-----	0----
Other none	NA-----	0----
Taxes (not deducted from wages or included in mortgage page payment)		
(specify): _____ none _____	NA	
Installment payments	none	
Motor Vehicle	none	
Credit Card (s)	\$1600.00	
Department store(s)		
Other	none-----	0----
Alimony: maintenance, and support paid to other-----	0----	
Regular expenses for operation of business profession-----	0----	
or far (attach detailed statement		
Other (specify):-----	0----	
Total monthly expenses	\$791.00-----	0-

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

NO

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?

NO

if yes how much NA

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

11. Have you paid-----or will you be paying – anyone ---other than an attorney (such as paralegal or a typist) any money for services in connection with this case, including the completion of this form?

NO

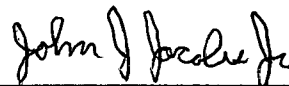
if yes how much? NA

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.

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

Executed on: 4/4/ 2018



John J. JACOBS, JR. PRO SE