

No. _____

IN THE
Supreme Court of the United States

ANGELIQUE DE MAISON,
Petitioner,

v.

SECURITIES AND EXCHANGE COMMISSION,
Respondent.

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

JEFFREY B. COOPERSMITH
ORRICK HERRINGTON & SUTCLIFFE LLP
701 Fifth Avenue, Suite 5600
Seattle, WA 98104
(206) 839-4339
jcoopersmith@orrick.com

LAUREN B. RAINWATER
DAVIS WRIGHT TREMAINE LLP
920 Fifth Avenue, Suite 3300
Seattle, Washington 98104
(206) 622-3150
laurenrainwater@dwt.com

Counsel of Record for Petitioner Angelique
de Maison

Petitioner Angelique de Maison seeks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

Petitioner has not previously been granted leave to proceed *in forma pauperis* in any other court.

Petitioner's declaration in support of this motion is attached hereto. The declaration states that Petitioner paid Davis Wright Tremaine LLP approximately \$130,000 for legal services in connection with this case. Those payments took the form of an initial retainer and a payment of fees in December 2016 authorized by the district court, following Ms. de Maison's sale of real property. Ms. de Maison forfeited to the SEC the remaining proceeds from the sale of her real property, subject to a reservation of rights based on the outcome of appellate proceedings. Undersigned counsel has represented Ms. de Maison *pro bono* since 2017, including throughout the appeal to the Second Circuit Court of Appeals. Mr. Coopersmith continues to represent Ms. de Maison *pro bono* after moving to Orrick Herrington & Sutcliffe LLP in October 2019.

Respectfully submitted,



Jeffrey B. Coopersmith
ORRICK HERRINGTON & SUTCLIFFE LLP
701 Fifth Avenue, Suite 5600
Seattle, WA 98104
(206) 839-4339
jcoopersmith@orrick.com
Counsel of Record for Petitioner



Lauren B. Rainwater
DAVIS WRIGHT TREMAINE LLP
920 Fifth Avenue, Suite 3300
Seattle, Washington 98104
(206) 622-3150
laurenrainwater@dwt.com

February 14, 2020

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

I, Angelique de Maison, 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>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Self-employment	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Interest and dividends	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Gifts	\$ <u>100</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Alimony	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Child Support	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Unemployment payments	\$ <u>0</u>	\$ <u>—</u>	\$ <u>0</u>	\$ <u>—</u>
Public-assistance (such as welfare)	\$ <u>569.⁰⁰</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Other (specify): <u>Food stamps</u>	\$ <u>670.⁰⁰</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Total monthly income:	\$ <u>569.⁰⁰</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</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
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			\$ _____
			\$ _____
			\$ _____

4. How much cash do you and your spouse have? \$ 100.00
 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
none	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

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

<input type="checkbox"/> Home Value <u>0</u>	<input type="checkbox"/> Other real estate Value <u>0</u>
<input type="checkbox"/> Motor Vehicle #1 Year, make & model <u>0</u> Value _____	<input type="checkbox"/> Motor Vehicle #2 Year, make & model <u>0</u> Value _____
<input type="checkbox"/> Other assets Description <u>0</u> 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
_____	\$ _____	\$ _____
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	Relationship	Age
P.V.	son	11
K.G.	daughter	19
EE.	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)	\$ 25. ⁰⁰	\$ _____
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No n/a		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No n/a		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 250. ⁰⁰	\$ _____
Home maintenance (repairs and upkeep)	\$ 0	\$ _____
Food	\$ 50. ⁰⁰	\$ _____
Clothing	\$ 0	\$ _____
Laundry and dry-cleaning	\$ 0	\$ _____
Medical and dental expenses	\$ 200. ⁰⁰	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ -100.	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$
Life	\$ 0	\$
Health	\$ 0	\$
Motor Vehicle - not consistent but a contribution from time to time	\$ 0	\$
Other: <u>VARIOUS CHILDRENS NEEDS</u>	\$ -50.	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$
Installment payments		
Motor Vehicle	\$ 0	\$
Credit card(s)	\$ 0	\$
Department store(s)	\$ 0	\$
Other: _____	\$ 0	\$
Alimony, maintenance, and support paid to others	\$ 0	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$
Other (specify): _____	\$	\$
Total monthly expenses:	\$ 675.00	\$

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? ~ \$130,000.00

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

Davis Wright Tremaine
Jeff Coopersmith / Lauren Rainwater

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:

n/a

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 true and correct.

Executed on: 2-8, 2020

Anglique de Maisson
(Signature)