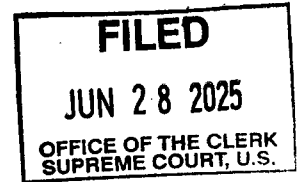


No. 25-5159

ORIGINAL

IN THE  
SUPREME COURT OF THE UNITED STATES

Laron A. Gregory - PETITIONER  
(Your Name)



VS

State of Ohio RESPONDENTS

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 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

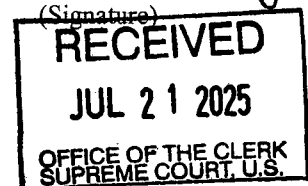
☒ Petitioner's affidavit or declaration in support of this motion is attached hereto.

☐ 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: \_\_\_\_\_  
\_\_\_\_\_

☐ A copy of the order of appointment is appended

Laron A. Gregory  
(Signature)



# AFFADAVIT OR DECLARATION

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

I, Laron A. Gregory 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

- 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 the amounts before any deductions for taxes or otherwise

| Income source                       | Average amount for the past 12 months |             | Amount Expected next month |             |
|-------------------------------------|---------------------------------------|-------------|----------------------------|-------------|
|                                     | You                                   | Your Spouse | You                        | Your spouse |
| Employment                          | \$ NA                                 | \$ NA       | \$ NA                      | \$ NA       |
| Self-Employment                     | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Income from Real Property           | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Interest and Dividends              | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Gifts                               | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Alimony                             | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Child Support                       | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Retirement                          | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Disability                          | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Unemployment                        | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Public assistance (Such as welfare) | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Other                               | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |
| Total monthly income                | \$ 11                                 | \$ 11       | \$ 11                      | \$ 11       |

- List your employment for the past two years most recent first.

| Employer        | Address  | Date of Employment   | Gross monthly pay |
|-----------------|--|----------------------|-------------------|
| Prison State Pk | Lake Erie<br>501 Thompson Rd<br>Carnegie, OH 44103 | 6/21<br>till present | \$ 12 to 18       |
|                 |  |                      | \$                |
|                 |  |                      | \$                |

3. List your spouse's employment history for the past two years most recent first.

| Employer | Address | Date of Employment | Gross monthly pay |
|----------|---------|--------------------|-------------------|
| N/A      |         |                    | \$                |
|          |         |                    | \$                |
|          |         |                    | \$                |

4. How much cash do you and your spouse have? \$ N/A  
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

| Type of Account | Amount you have | Amount your spouse has |
|-----------------|-----------------|------------------------|
|                 | \$              | \$                     |
|                 | \$              | \$                     |
|                 | \$              | \$                     |

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 \_\_\_\_\_

☐ Motor Vehicle #1  
Year Make and Model 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

| Person owing you or your spouse | 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)

| Name | Relationship | Age |
|------|--------------|-----|
| N/A  |              |     |
|      |              |     |
|      |              |     |

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 Mortgage payment (include lot rented for mobile home)                               | \$ <u>N/A</u> | \$ <u>N/A</u> |
| Are real estate taxes included?<br><input type="checkbox"/> yes <input type="checkbox"/> no |               |               |
| Is property insurance included?<br><input type="checkbox"/> yes <input type="checkbox"/> no |               |               |
| Utilities (electricity, heating fuel water sewer and phone)                                 |               |               |
| Home maintenance (repair upkeep)  | \$ _____      | \$ _____      |
| Food  | \$ _____      | \$ _____      |
| Clothing  | \$ _____      | \$ _____      |
| Laundry and dry- cleaning   | \$ _____      | \$ _____      |
| Medical and Dental expenses   | \$ _____      | \$ _____      |
| Transportation (not including motor vehicle payments)                                       | \$ _____      | \$ _____      |
| Recreation entertainment, newspapers magazines etc.   | \$ _____      | \$ _____      |
| Insurance (not deducted from wages or included in mortgage payments)                        | \$ _____      | \$ _____      |
| Homeowner's or renter's   | \$ _____      | \$ _____      |
| Life  | \$ _____      | \$ _____      |
| Health  | \$ _____      | \$ _____      |
| Motor Vehicle   | \$ _____      | \$ _____      |
| Other _____   | \$ _____      | \$ _____      |
| Credit Card(s)  | \$ _____      | \$ _____      |
| Department Store(s)   | \$ _____      | \$ _____      |
| Other _____   | \$ _____      | \$ _____      |
| Alimony maintenance and support paid to others  | \$ _____      | \$ _____      |
| Regular expenses for operation of business, profession, or farm (attach detailed statement) |               |               |
| Other _____   | \$ _____      | \$ _____      |
| Total monthly Expenses  | \$ _____      | \$ _____      |

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

☐ yes ☒ no (If yes please describe on an attached sheet)

10. Have you paid-or will you be paying-an attorney any money for services in connection to this case, including the completion of this form? ☐ yes ☒ no

If yes, How much? \_\_\_\_\_

If yes state, the attorneys name address and phone number:

11. Have you paid or will you be paying anyone other than an attorney (such as a paralegal or a typist) any money services in connection to this case, including the completion of this form? ☐ yes ☒ no

If yes, How much? \_\_\_\_\_

If yes state, the attorneys name address and phone 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 forgoing is true and correct.

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

Executed on June 28, 2025

Laron Gregory  
Signature