25-5254



IN THE

SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S.
FILED

MAY 1 6 2025

OFFICE OF THE CLERK

Xera Ames	— PETITIONER
(Your Name)	·

VS.

FELEX. - RE

- 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:

El Petitioner has previously been granted leave to proceed in forma pauperis in
the following court(s):
District Court
Court of Appeals.
☐ 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, // Ct + I/ CL -, 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 A	Average monthly amount during he past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0	\$	\$_6	s O
Self-employment	\$ 200.00	\$	\$ 200,00	\$
Income from real property (such as rental income)	y \$ <u></u>	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$_	\$
Alimony	\$	\$	\$	\$
Child Support	\$	\$	\$	\$
Retirement (such as socia security, pensions, annuities, insurance)	I \$	\$	\$	\$
Disability (such as social security, insurance payme	ents) \$3,700, ⁰⁷	\$	\$ 3,700,10	\$
Unemployment payments	\$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	\$	\$	\$	\$
Total monthly incon	ne: \$ <u>3,900</u>	\$	\$ 3.900.00	\$

Employer Market	Address	Dates of Employment	Gross monthly pay
			. \$. \$_
9 7:			\$
(Gross month	ouse's employment history ly pay is before taxes or	ry for the past two years	, most recent employer fir
Employer	Address	,	Tropor in
	Address	Dates of Employment	Gross monthly pay
	<u> </u>		\$
			\$ \$
institution.	a chaoldina a	Amount you have	
institution.	e.g., checking or savings)	Amount you have \$ \$ \$ \$ \$	Amount your spouse has
institution. Type of account (e	e.g., checking or savings)	Amount you have \$ \$ \$ \$ \$	
institution. ype of account (e	e.g., checking or savings)	Amount you have \$ \$ \$ \$ \$	Amount your spouse has
institution. Ype of account (english the assets, and ordinary how the account (english the assets).	and their values, which usehold furnishings.	Amount you have \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	owns. Do not list clothing

Person owing you or your spouse money	Amount owed		or your spouse money, and t
	\$		\$
	\$		\$
F. C.	\$		\$
7. State the persons who rely instead of names (e.g. "J.S Name	Relations	•	For minor children, list initials Age
8. Estimate the average month paid by your spouse. Adjusted annually to show the month	nly expenses of you a	nd your family.	Show separately the amounts
annually to show the month	ly rate.	nat are made v	veekly, biweekly, quarterly, or
oo show the month	ly rate.	nat are made v You	Show separately the amounts veekly, biweekly, quarterly, or Your spouse
Rent or home-mortgage payme (include lot rented for mobile h	ly rate. nt	,	or other transfer of the second of the secon
oo show the month	nt ome)	,	or other, blueekly, quarterly, or
Rent or home-mortgage payme (include lot rented for mobile home-mortgage payme).	nt ome) ? \(\sum \text{Yes} \text{No} \) ? \(\sum \text{Yes} \text{No} \)	,	Your spouse
Rent or home-mortgage payme (include lot rented for mobile home-mortgage payme). Are real estate taxes included Is property insurance included Utilities (electricity, heating five	nt ome) ? \(\sum \text{Yes} \text{No} \) ? \(\sum \text{Yes} \text{No} \) l,	You \$_155	Your spouse Solution of the state of the st
Rent or home-mortgage payme (include lot rented for mobile hare real estate taxes included Is property insurance included Utilities (electricity, heating fue water, sewer, and telephone)	nt ome) ? \(\sum \text{Yes} \text{No} \) ? \(\sum \text{Yes} \text{No} \) l,	You \$ 155 \$ 500.	Your spouse \$ 000
Rent or home-mortgage payme (include lot rented for mobile hare real estate taxes included Is property insurance included Utilities (electricity, heating fue vater, sewer, and telephone) Home maintenance (repairs and food	nt ome) ? \(\sum \text{Yes} \text{No} \) ? \(\sum \text{Yes} \text{No} \) l,	You \$ 155 \$ 500.	Your spouse Solution Your spouse Solution \$ 000 \$ 000
Rent or home-mortgage payme (include lot rented for mobile hear real estate taxes included Is property insurance included Utilities (electricity, heating fue water, sewer, and telephone) Home maintenance (repairs and	nt ome) ? \(\sum \text{Yes} \text{No} \) ? \(\sum \text{Yes} \text{No} \) l,	You \$ 155 \$ 500.	Your spouse Solution Your spouse Solution \$ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

	You	Your spouse
Transportation (not including motor vehicle payment	(s) \$ 100, 100	. \$
Recreation, entertainment, newspapers, magazines, e	etc. \$	\$
Insurance (not deducted from wages or included in m	ortgage payments)	
Homeowner's or renter's	\$ 175,00	\$
Life	\$ 120.00	\$
Health	\$	\$
Motor Vehicle	\$ 250.00	\$
Other:	\$_400,08	\$
Taxes (not deducted from wages or included in mortga	ge payments)	Ψ
(specify):	\$	\$
Installment payments		
Motor Vehicle	\$	\$
Credit card(s)	\$ 150.00	\$
Department store(s)	\$ 150,00	\$
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	
Other (specify):	\$ &	
Total monthly expenses:	\$ 3,900,00	

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? 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?
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. In a single mom on disability its very Unfornuate that Im in this situation but I cannot afford this expense.
I declare under penalty of perjury that the foregoing is true and correct.
Executed on: July 2, 2025 May Damon Ryan Young Jr
Notary Public - State of Indiana (Signature) County of Residence: Hendricks Commission Number: NP0753272 My Commission Expires: 12-10-2031

INDIANA NOTARY ACKNOWLEDGEMENT

COUNTY OF Hendricks ss.)	
Before me, a Notary Public in and for said County and State, perso Vena Awes, who, being first duly acknowledged the execution of the foregoing Domen Vena stated that any representations therein contained are true.	nally appeared sworn, and
WITNESS my hand and Notarial Seal this day ofu	2025
My Commission Expires: 12-16-2031 County of Residence: Hendricks	3
Notary Public, Signed	
Notary Public, Printed	

