

25-5617 ORIGINAL

No. _____

Supreme Court, U.S.
FILED

JUL 30 2025

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

Marguerite A. Sawires — PETITIONER
(Your Name)

VS.

Elizabeth Board of Education et al. 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):

Superior Court of New Jersey (MID-L-001790-25)

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: _____
_____, or

a copy of the order of appointment is appended.

Marguerite A. Sawires **FILED**
(Signature)
AUG - 5 2025
OFFICE OF THE CLERK
SUPREME COURT, U.S.

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

I, Marguerite A. Sawire, 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	
	Partner You	Unmarried You	Partner You	Spouse
Employment	\$ 0.0	\$ 46.475	\$ 0.0	\$ 2.600
Self-employment	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Income from real property (such as rental income)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Interest and dividends	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Gifts	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Alimony	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Child Support	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Disability (such as social security, insurance payments)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Unemployment payments	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Public-assistance (such as welfare)	\$ 0.0	\$ 0.0	\$ 0.0	\$ 0.0
Other (specify): <u>0.0</u>	<u>\$ 0.0</u>	<u>\$ 0.0</u>	<u>\$ 0.0</u>	<u>\$ 0.0</u>
Total monthly income:	<u>\$ 0.0</u>	<u>\$ 46.475</u>	<u>\$ 0.0</u>	<u>\$ 2600</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
N/A	N/A	N/A	\$ N/A

Partner

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
		3/1999	\$ 3000
			\$
			\$

4. How much cash do you and your spouse have? \$

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
Checking account (B&A)	\$ 500	\$ Same
	\$	\$
	\$	\$

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

Home
Value 100 00

Other real estate
Value N/A

Motor Vehicle #1
Year, make & model NISSAN 2018 Rogue
Value Still under loan
(20,000)

Motor Vehicle #2
Year, make & model Toyota 2007 Venza
Value 500

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
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
	\$ <u></u>	\$ <u></u>
	\$ <u></u>	\$ <u></u>

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
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>

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	Partner
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>5000.0</u>	\$ <u>500</u>	
Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>0.0</u>	\$ <u>120</u>	
Home maintenance (repairs and upkeep)	\$ <u>0.0</u>	\$ <u>0.0</u>	
Food	\$ <u>0.0</u>	\$ <u>400</u>	
Clothing	\$ <u>0.0</u>	\$ <u>0.0</u>	
Laundry and dry-cleaning	\$ <u>0.0</u>	\$ <u>200</u>	
Medical and dental expenses	\$ <u>0.0</u>	\$ <u>0.0</u>	

	You	Partner Your spouse
Transportation (not including motor vehicle payments)	\$ 0.0	\$ 336
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.0	\$ 0.0
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ 25	\$ 300
Health	\$ 0.0	\$ 240
Motor Vehicle	\$ 6.0	\$ 0.0
Other: 0.0	\$ 0.0	\$ 0.0
Taxes (not deducted from wages or included in mortgage payments)		
(specify): \$ 750 X 4	\$ 300	\$ 3000 / year
Installment payments		
Motor Vehicle	\$ N/A	\$ N/A
Credit card(s)	\$ 0.0	\$ 500
Department store(s)	\$ 0.0	\$ 0.0
Other: 214	\$ 0.0	\$ 0.0
Alimony, maintenance, and support paid to others	\$ 0.0	\$ 0.0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.0	\$ 0.0
Other (specify): 214	\$ 0.0	\$ 0.0
Total monthly expenses:	\$ 25	\$ 2826

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? n/a

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? n/a

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.

more expenses

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

Executed on: 29 August, 20 25

Ambika Chabra
29th August, 2025

Magdoules Sawires
(Signature)



Magdoules Sawires

NOTICE: This is a public document. Do not enter personal identifying information on it, such as your full Social Security number, driver's license number, insurance policy number, vehicle plate number, active financial account, credit card number or military status. This document as submitted will be available to the public upon request.

Name Margdowen A. Sawires
Address 1010 morning Glory Dr.
monroe, NJ 08831
Telephone Number 609 379 2337
Email Address margdowen02@gmail.com

FILED

March 25, 2025

Hon. Michael V. Cresitello, Jr., P.J.Cv.

middle sex Court of New Jersey
middlesex County (if applicable)
Docket Number: MID-L-1790-25

Margdowen A. Sawires

Plaintiff(s)/Appellant(s),

v.
monroe Police Department
USM Penn Medicine
Defendant(s)/Respondent(s).

Order Waiving Filing Fees

This matter having been brought before the court on application of _____, (plaintiff(s) / appellant(s) / defendant(s) / respondent(s)) for an Order waiving filing fees pursuant to Rule 1:13-2 or Rule 2:7-1, and the Court having considered the moving party's financial information, the matter and for good cause appearing:

(Do not write below this line, For Court Use Only)

It is on this 25th day of March, 2025, ORDERED that the application for a fee waiver is

Granted Denied

/s/ Michael V. Cresitello, Jr.

Hon. Michael V. Cresitello, Jr., P.J.Cv.

**Additional material
from this filing is
available in the
Clerk's Office.**