

In the  
**Supreme Court of the United States**

TIMOTHY MARCUS MAYBERRY,  
Petitioner,

v.

STACY HALL,  
Respondent.

On Petition for *Writ of Certiorari* to  
the Court of Appeals of Indiana

**ORIGINAL**

FILED  
SEP 10 2025  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

**PETITIONER'S VERIFIED MOTION FOR LEAVE TO  
PROCEED IN FORMA PAUPERIS**

Comes now, Petitioner, *in pro per*, pursuant to Supreme Court Rule 39, to move the Court to grant leave for me to proceed in this action *in forma pauperis*. In support, I provide the following:

1. I have contemporaneously filed herewith my *Verified Petition for Writ of Certiorari*.
2. I am prisoner of the State of Indiana.
3. On June 22<sup>nd</sup>, 2022, I was granted leave to proceed *in forma pauperis* in the trial court; on May 16<sup>th</sup>, 2024, I was granted leave to proceed *in forma pauperis* in the appellate court.
4. In support of this motion I have attached hereto my *Form 4 of the Appendix of Forms*, hereby incorporated herein by reference.
5. Counsel was not appointed for me at any stage of the proceedings below.

RECEIVED  
SEP 16 2025  
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SUPREME COURT, U.S.

VERIFICATION<sup>1</sup>

I, TIMOTHY MARCUS MAYBERRY, an adult competent to testify and based on my own personal knowledge, and information and belief, hereby affirm, under the penalties for perjury, that the foregoing representations are true and correct to the best of my knowledge and belief.

"9. 10. 25"  
Executed date

by: Mayson-EL  
TIMOTHY MARCUS MAYBERRY

For the reasons set forth above, I respectfully request the Court to grant this Motion, by granting me leave to proceed *in forma pauperis*, and all other relief it deems just.

Respectfully submitted,

by: Mayson-EL  
TIMOTHY MARCUS MAYBERRY  
Petitioner, *in pro per*  
c/o 1 Park Row  
Michigan City, Indiana 46360

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<sup>1</sup> See Ford v. Wilson, 90 F.3d 245, 246 (7<sup>th</sup> Cir. 1996) ("By declaring under penalty of perjury that [this document is] true, and by signing it, [I] converted [this document], or rather those factual assertions in [this document] that complied with the requirements for affidavits specified in the rule . . . into an affidavit." (internal citations and quotation marks omitted)), cert. denied; Fed. R. Civ. P. 11(b); 28 U.S.C. § 1746.

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

I, TIMOTHY MARCUS MANGERRY, 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>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Self-employment	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Gifts	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Alimony	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Child Support	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</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
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	\$ <u>N/A</u>
			\$ _____
			\$ _____

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

4. How much cash do you and your spouse have? \$ 0  
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
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
	\$ _____	\$ _____
	\$ _____	\$ _____

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 N/A

Motor Vehicle #1  
Year, make & model N/A  
Value \_\_\_\_\_

Motor Vehicle #2  
Year, make & model N/A  
Value \_\_\_\_\_

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>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>0</u>	\$ <u>N / A</u>
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>0</u>	\$ <u>N / A</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>N / A</u>
Food	\$ <u>0</u>	\$ <u>N / A</u>
Clothing	\$ <u>0</u>	\$ <u>N / A</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>N / A</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>N / A</u>

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

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? \_\_\_\_\_

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.

I AM A PRISONER OF THE STATE OF INDIANA.

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

Executed on: SEPTEMBER 10, 2025

By: MASON EC  
(Signature)