25-5988

FILED

AUG 28 2025

OFFICE OF THE CLERK
SUPPREME COURT, U.S.

IN THE

SUPREME COURT OF THE UNITED STATES

HUONG THI NGLIYEN — PETITIONER (Your Name)

VS.

CATHOLIC COMMUNITY SERVICES, 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): *Supreme Court of Washington State. Tunited States District Court-Town WA *Dunited States Court of Appeals for the federal Circuit
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.
Ola Anord
(Signature)



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

I, HIONG THI NGUYEN, 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 dur the past 12 months		Amount expected next month	
_	You	Spouse	You	Spouse
Employment	\$	\$	_ \$	_ \$
Self-employment	\$	_ \$	 	
Income from real prope (such as rental income	erty \$ e)	_ \$		
Interest and dividends	\$	\$. \$	_ \$
Gifts	\$	\$. \$	
Alimony	\$	\$		\$
Child Support	\$	\$		
Retirement (such as soo security, pensions, annuities, insurance)	cial \$	\$		
Disability (such as socia security, insurance pay	\$967.00 ments)	\$	\$ 967.00	\$
Unemployment payment	s \$	\$	\$	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify): Spouse	. Work s	\$4010.00 (2) Week < 1	\$	\$ 1,010.00
Total monthly inc	ome: \$	\$	\$	(2 veek) \$

Employer	Address	Dates of	Gross monthly pay
		Employment	\$
			\$
		•	5
3. List your spouse (Gross monthly p	e's employment history for ay is before taxes or other	or the past two years, er deductions.)	, most recent employer first.
Employer	Address	Dates of	Gross monthly pay
EAST ASIA	602 S 38th	Employment	\$ 4,015.00
Sweer Mankot	Strawn	July 6, 2009	\$ <u>/</u>
1000101	·	<u> </u>	Ψ
•	WA 48418	,	
4. How much cash d Below, state any institution.	WA 98418 to you and your spouse ha money you or your spou	ve? \$ <u>A Yound</u> \$ _ se have in bank accou	200,00 any other financial
Below, state any institution.	o you and your spouse ha	se have in bank accou	ants or in any other financial
Below, state any institution. Fype of account (e.g.	o you and your spouse he money you or your spou	se have in bank accou	Amount your spouse has \$
Below, state any institution. Type of account (e.g.	o you and your spouse ha money you or your spou	se have in bank accou	ants or in any other financial Amount your spouse has
Below, state any institution. Type of account (e.g.)	o you and your spouse had money you or your spou	Amount you have \$ \$ \$	Amount your spouse has \$
Below, state any institution. Type of account (e.g.) 5. List the assets, a and ordinary house.	o you and your spouse had money you or your spouse., checking or savings)	Amount you have \$ \$ \$	Amount your spouse has \$ \$ \$ \$ owns. Do not list clothing
Below, state any institution. Type of account (e.g.) 5. List the assets, a	o you and your spouse had money you or your spouse., checking or savings)	Amount you have \$ \$ s ou own or your spouse	Amount your spouse has \$ \$ \$ \$e owns. Do not list clothing
Below, state any institution. Type of account (e.g.) List the assets, a and ordinary house Value 550, 60	o you and your spouse had money you or your spouse., checking or savings) and their values, which your sehold furnishings.	Amount you have \$	Amount your spouse has \$ \$ \$ \$e owns. Do not list clothing
Below, state any institution. Type of account (e.g.) List the assets, a and ordinary house Value 550, 60	o you and your spouse had money you or your spouse., checking or savings) and their values, which your sehold furnishings.	Amount you have \$	Amount your spouse has \$ \$ s e owns. Do not list clothing te againedel

÷.

6. State every person, busing amount owed.	ness, or organization ow	ing you or	your spe	ouse money, and	d the
Person owing you or your spouse money	Amount owed to you		Amount owed to your spouse		
	\$	\$			
	\$	\$			
	\$	\$			
7. State the persons who rely instead of names (e.g. "J.S	on you or your spouse fo "instead of "John Smith"	r support. ").	For mino	r children, list ir	nitials
Name	Relationship		Age		
	·				-
8. Estimate the average mont paid by your spouse. Ad annually to show the mont	just any payments that	our family. are made v You	Show se reekly, bi	parately the amweekly, quarter	ounts y, or
Rent or home-mortgage payn (include lot rented for mobile	nent home)	\$		\$	
Are real estate taxes include Is property insurance include			، مل	<u> </u>	
Utilities (electricity, heating f water, sewer, and telephone)	iuel,	\$ \$20t	2.00	garbage; \$ sever	ikater
Home maintenance (repairs a	nd upkeep)	\$		\$	
Food		\$	400 n	onth >	_
Clothing Good will	shopping amonth	\$ 80.0	<u>ა</u>	\$ 80.00	_
Laundry and dry-cleaning		\$ 50.0	Atgram a	\$ 50.m	_month
Medical and dental expenses		\$		\$	_

,	You	Your spouse
Transportation (not including motor vehicle payments)	\$	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mor	tgage payments)	
Homeowner's or renter's	\$	\$466.61
Life	\$ 50. oo	\$ 60.00
Health	\$	\$
Motor Vehicle	\$.880.87.	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage	e payments)	
(specify):	\$	\$
Installment payments		
Motor Vehicle	\$	\$
Credit card(s)	\$ 4,000	\$
Department store(s)	\$	\$
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:	\$,2,20	\$

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 V 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?	•
form? \square Yes \square No	1
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. Because our income is not enough to cover monthly bill and daily miscell expenses. Usually times I have to rely on my Credit county of have to borrow money from family or friends to make monthly payments. I declare under penalty of perjury that the foregoing is true and correct.	aneo O
Executed on: October 20, 2025	
- OZAA WOND	
(Signature)	