25-6292 ORIGINAL

IN	THI	F

SUPREME COURT OF THE UNITED STATES

Supreme Court, U.S. FILED

JUN 0 2 2025

OFFICE OF THE CLERK

Rickey Benson - PETITIONER (Your Name)

VS.

Kirk Fields, et al _ R

- 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 the following court(s):	in
Petitioner has not previously been granted leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court. Leave to proceed in formal pauperis in any other court.	
Petitioner's affidavit or declaration is not attached because the court belappointed counsel in the current proceeding, and:	w C
☐ The appointment was made under the following provision of law:,	or
\Box a copy of the order of appointment is appended.	

(Signature)

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

I, <u>Rickey Benson</u>, 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.

	ge monthly amo st 12 months	ount during	Amount expe	ected
	You	Spouse	You	Spouse
Employment	\$	\$	\$	\$
Self-employment	\$ <u> </u>	\$6	\$	\$\$
Income from real property (such as rental income)	\$	\$	\$	\$
Interest and dividends	\$	\$	\$	\$
Gifts	\$	\$	\$	\$ 0
Alimony	\$	\$	\$	~
Child Support	\$	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$	\$	\$	\$
Disability (such as social security, insurance payments	\$	\$	\$	\$
Unemployment payments	\$	\$	\$ <i>O</i>	\$
Public-assistance (such as welfare)	\$	\$	\$	\$
Other (specify):	\$	\$	\$0	\$
Total monthly income:	\$	\$	\$	<i>></i>

Employer	Address	Dates of	Gros	s monthly pay
Ø	6	Employment	¢	0
0	0	0	Ψ \$	0
0	6	0	\$	0
	se's employment histor pay is before taxes or Address	ry for the past two years other deductions.) Dates of	•	ent employer : s monthly pay
6	Ø	Employment	•	0
	- 0	- 8	\$	0
		- - 0	Ψ \$	0
Below, state an institution. Type of account (e.	y money you or your g g., checking or savings		ants or in a	any other fina
Below, state an institution. Type of account (e.	y money you or your	spouse have in bank accors Amount you have	ants or in	our spouse h
Below, state an institution. Type of account (e.	g., checking or savings and their values, which	spouse have in bank accords. Amount you have \$\$ \$ \$ ch you own or your spous	Amount y \$ 0 \$ 0 \$ 0	our spouse h
Below, state an institution. Type of account (e	g., checking or savings and their values, which is the control of	spouse have in bank accords) Amount you have \$\$ \$ ch you own or your spous	Amount y \$ \$ \$ \$ e owns. If	our spouse h

Person owing you or your spouse money	Amount owed to yo	ou Amo	ount owed to your spouse
<i>b</i>	\$	\$	<i>D</i>
. 0	8	\$	6
6	\$	\$	0
	rely on you or your spouse "J.S." instead of "John Smit		r minor children, list initials
Name Ø	Relationship		Age
0	ð		0
0	0		0
annually to show the n	nonthly rate.		dy, biweekly, quarterly, or
annually to snow the n	nonthly rate.	You	Your spouse
Rent or home-mortgage p	payment	You	·
·	payment bbile home) cluded? Yes No	You	Your spouse
Rent or home-mortgage process (include lot rented for more all estate taxes include the state taxes include taxes include the state taxes include taxes include taxes in the state taxes include taxes include taxes in the state t	payment bile home) cluded?	You	Your spouse
Rent or home-mortgage point (include lot rented for more and estate taxes included in the second sec	payment bile home) cluded?	You \$	Your spouse
Rent or home-mortgage processes (include lot rented for more and the real estate taxes included in the second seco	payment bile home) cluded?	You \$	Your spouse
Rent or home-mortgage processes (include lot rented for more and the real estate taxes included in the second seco	payment bile home) cluded?	You \$	Your spouse \$ 0

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 morta	gage payments)	
Homeowner's or renter's	\$	\$
Life	\$	\$
Health	\$	\$
Motor Vehicle	\$	\$
Other: None	\$	\$
Taxes (not deducted from wages or included in mortgage	payments)	
(specify): None	\$	\$
Installment payments		
Motor Vehicle	\$	\$
Credit card(s)	\$	\$
Department store(s)	<i>o</i> \$	\$
Other:None	\$	\$
Alimony, maintenance, and support paid to others	\$	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	<i>ಶ</i> \$
Other (specify):	\$	\$
Total monthly expenses:	\$	<i>8</i>

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			ijor changes lext 12 montl		y income or e	expenses or in	n your assets or
	□Yes	Νo	If yes, des	cribe on an atta	ched sheet.	None	
			÷				
10. H	lave you p vith this ca	aid – or wi ase, includii	ll you be pay ng the compl	ying – an attorn letion of this for	ney any mone rm? Yes	ey for services Noft	in connection
If	f yes, how	much?	None				
Ii	f yes, state	e the attorn	ney's name, a	address, and tel	ephone numb	oer: Nose	
a fo	typist) an orm?	y money fo	r services in	ing—anyone otl connection wit	her than an a h this case, i	ttorney (such ncluding the o	as a paralegal or completion of this
	☐ Yes	Ø.No	PB	•			
If	f yes, how	⊠No much?	None				
If yes	s, state the	e person's r	name, addres	s, and telephon	e number: 🖊	vare	
				•			
12. P				will help explai	n why you ca	annot pay the	costs of this case.
	Incar	ceroted	e (
							_
				•		•	
I decl	are under	penalty of	perjury that	t the foregoing	is true and c	orrect.	
Execu	ited on:	May	30	, 20	2 5		;
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						Signatur	re)
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