

25-7135

No. _____

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

Jayakumar Sundaran Nair — PETITIONER
(Your Name)

VS.

Ermin Ciric, 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):

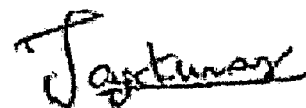
Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

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.



(Signature)

ORIGINAL

32-2789

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

I, Jayakumar Sundaran Nair, 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>	\$ _____	\$ _____
Self-employment	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>250</u>	\$ _____	\$ _____	\$ _____
Disability ¹ (such as social security, insurance payments)	\$ <u>100</u>	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ <u>350</u>	\$ _____	\$ _____	\$ _____

¹ Petitioner is a retired Indian citizen aged 74 years living in a retirement group home.

100

100

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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			\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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
N/A			\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

4. How much cash do you and your spouse have? \$ 50

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
State Bank of India, Checking	\$ 93	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

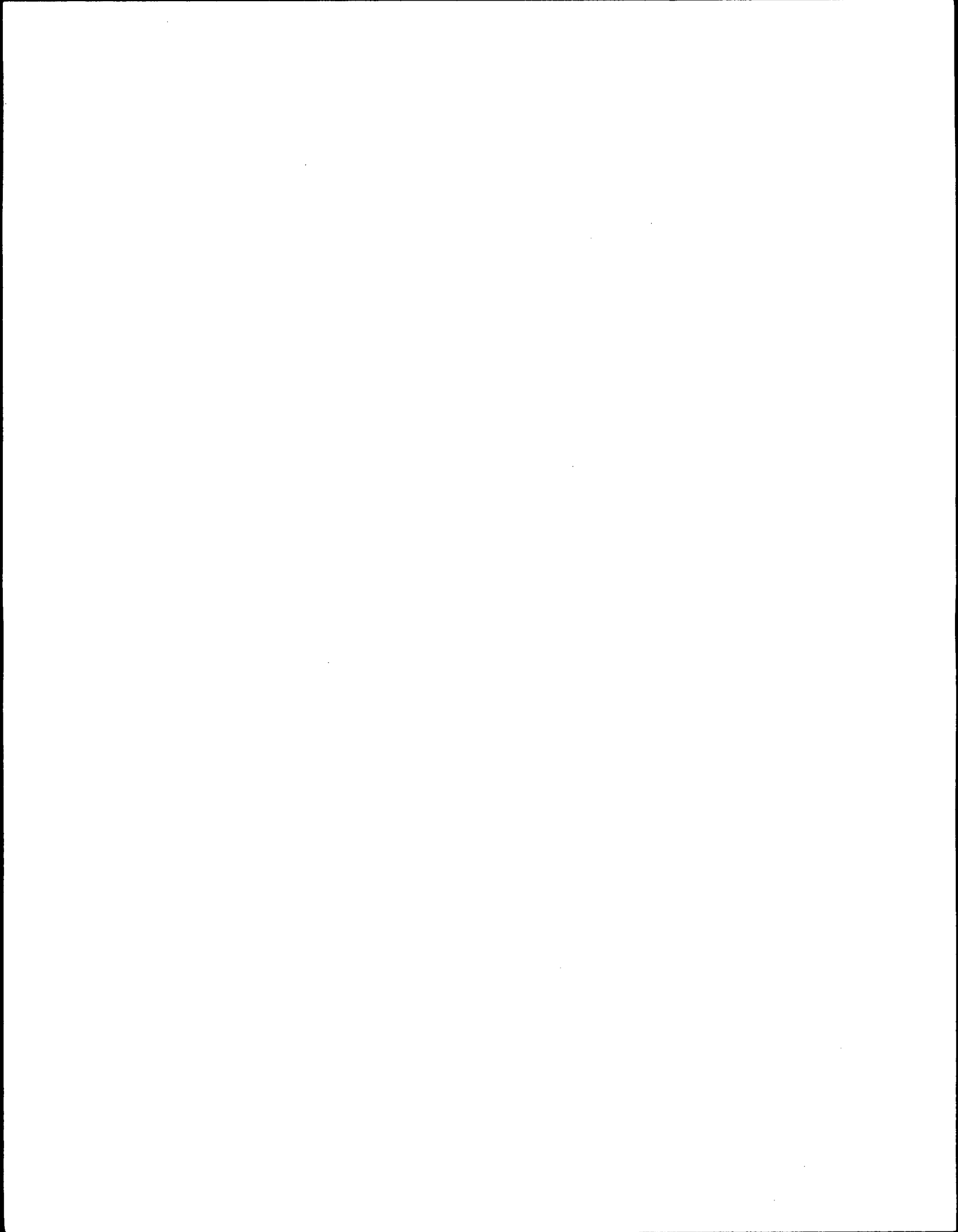
Home
Value N/A

Other real estate
Value N/A

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

Motor Vehicle #2
Year, make & model _____
Value _____

Other assets N/A
Description _____
Value _____



6. State every person, business, or organization owing you or your spouse money, and the amount owed.

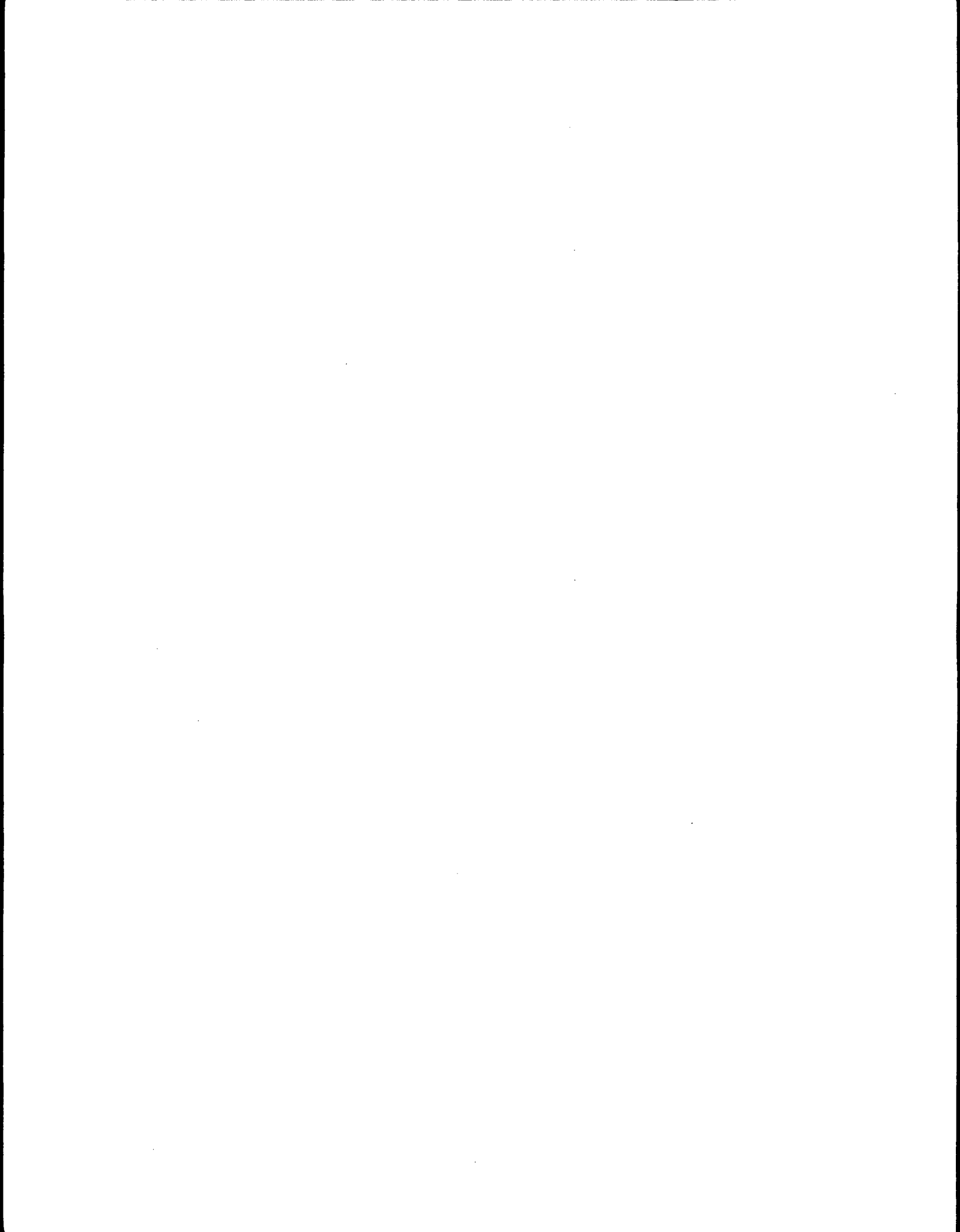
Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
N/A	\$ N/A	\$ N/A
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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").

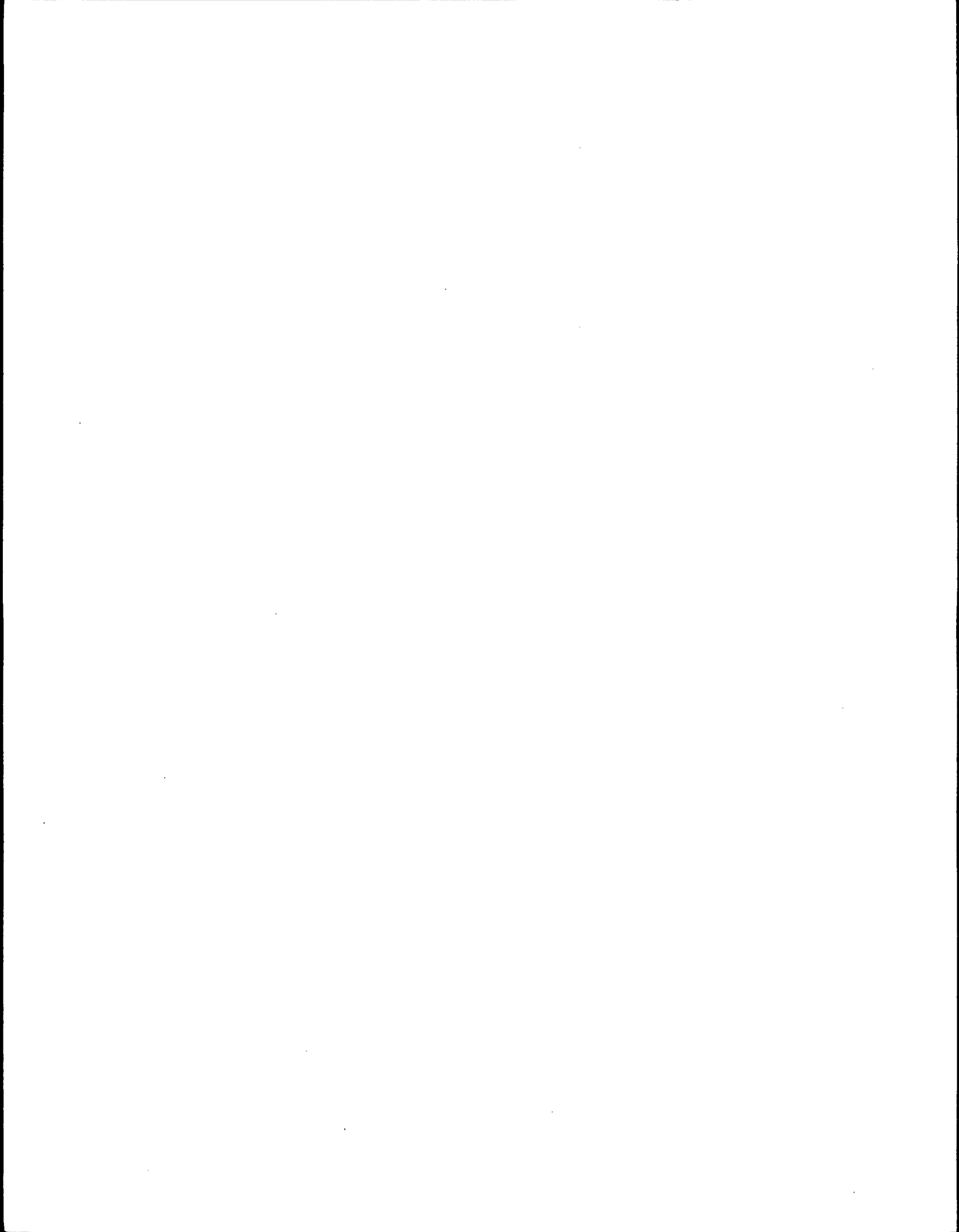
Name	Relationship	Age
N/A	_____	_____
_____	_____	_____
_____	_____	_____

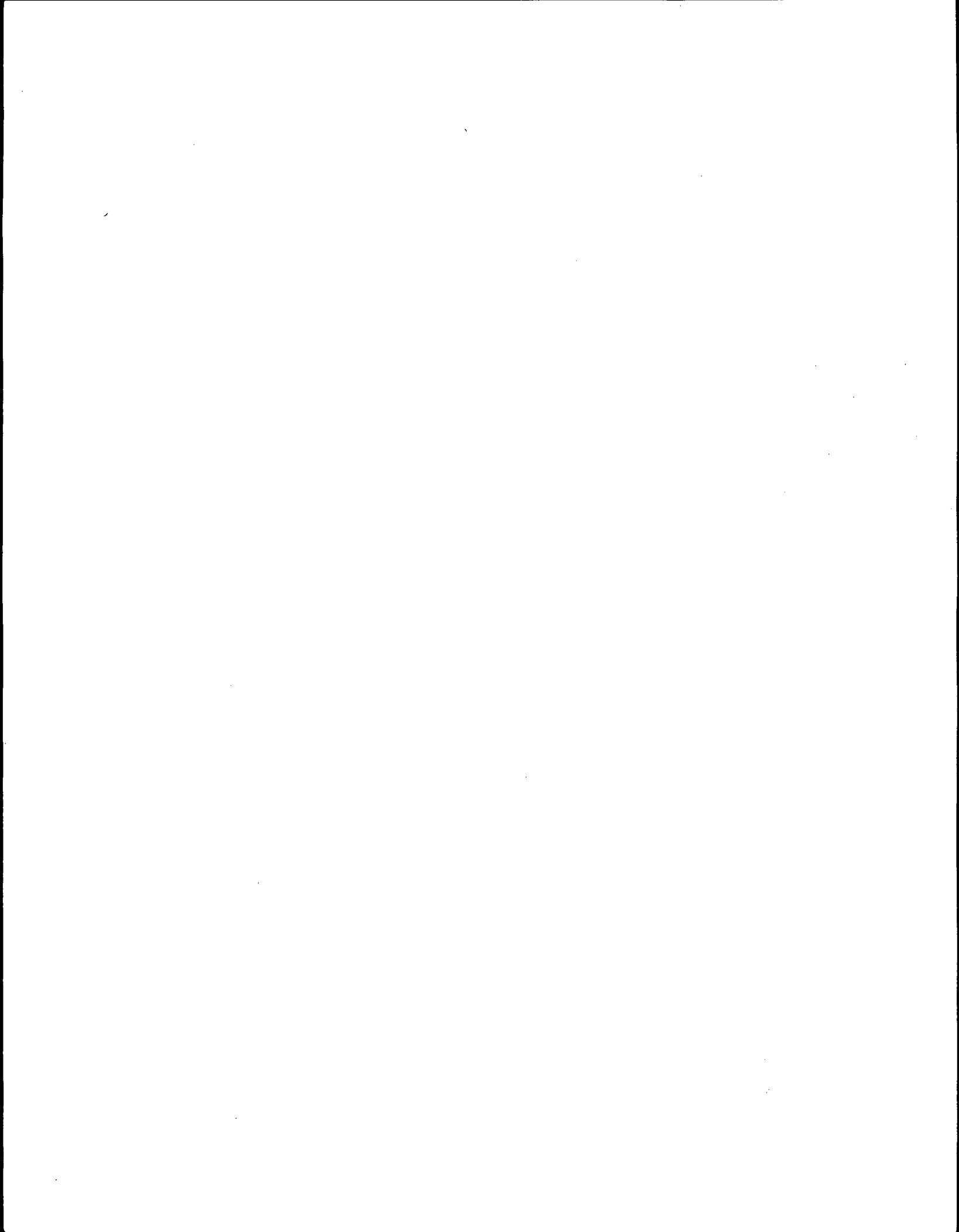
8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, or annually to show the monthly rate.

	You	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 155	\$ N/A
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No	(currently in a group home, all amounts are INR converted to USD)	
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 10 (cell service)	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ 0	\$ _____
Clothing	\$ 0	\$ _____
Laundry and dry-cleaning	\$ 0	\$ _____
Medical and dental expenses	\$ 0 (State Insurance)	\$ _____



	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 10 _____	\$ N/A _____
Recreation, entertainment, newspapers, magazines, etc.	\$ 0 _____	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0 _____	\$ _____
Life	\$ 0 _____	\$ _____
Health	\$ 15 _____	\$ _____
Motor Vehicle	\$ 0 _____	\$ _____
Other: _____	\$ 0 _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0 _____	\$ _____
Installment payments		
Motor Vehicle	\$ 0 _____	\$ _____
Credit card(s)	\$ 0 _____	\$ _____
Department store(s)	\$ 0 _____	\$ _____
Other: _____	\$ 0 _____	\$ _____
Alimony, maintenance, and support paid to others	\$ 0 _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0 _____	\$ _____
Other (specify): _____	\$ 0 _____	\$ _____
Total monthly expenses:	\$ 190 _____	\$ _____





No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

Rajakumari Susheelkumar — PETITIONER
(Your Name)

VS.

Ermin Ciric, 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):

Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

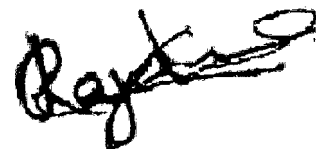
Petitioner's affidavit or declaration in support of this motion is attached hereto.

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.



(Signature)

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

I, Rajakumari Susheelkumar, 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>	\$ _____	\$ _____
Self-employment	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>288</u>	\$ _____	\$ _____	\$ _____
Disability ¹ (such as social security, insurance payments)	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ <u>288</u>	\$ _____	\$ _____	\$ _____

¹ Petitioner is a retired Indian citizen aged 65 years living in India. All amounts are USD equivalent of Indian Rupees

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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			\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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
N/A			\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

4. How much cash do you and your spouse have? \$ 360
 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>State Bank of India, Checking</u>	\$ <u>180</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 _____ Value _____
- Other assets N/A
 Description _____
 Value _____

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6. State every person, business, or organization owing you or your spouse money, and the amount owed.

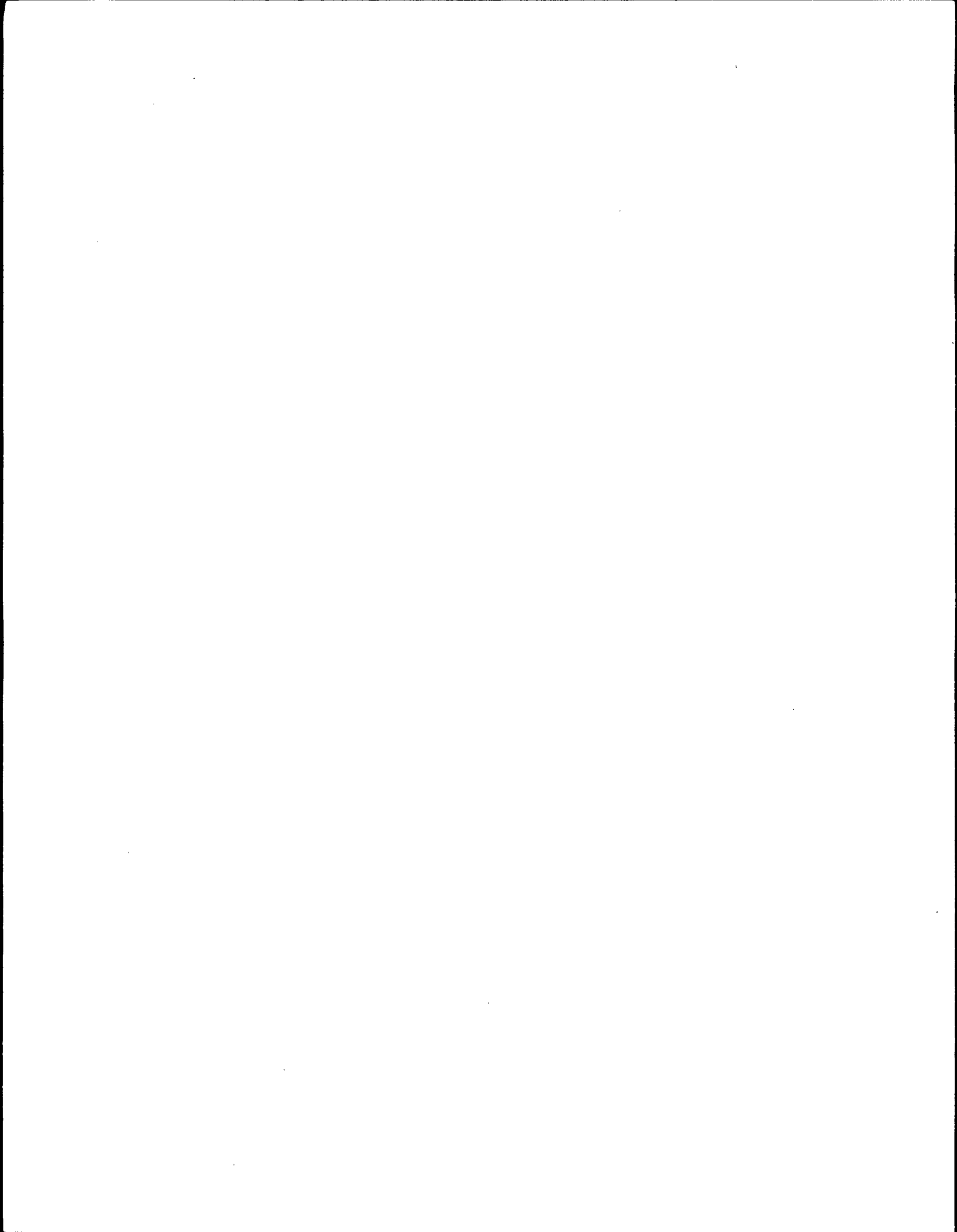
Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
N/A	\$ N/A	\$ N/A
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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
N/A	_____	_____
_____	_____	_____
_____	_____	_____

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)	\$ 0	\$ N/A
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No	(staying in husband's family home)	
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 10 (cell service)	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ 0	\$ _____
Clothing	\$ 0	\$ _____
Laundry and dry-cleaning	\$ 0	\$ _____
Medical and dental expenses	\$ 0 (State Insurance)	\$ _____



	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 10 _____	\$ N/A _____
Recreation, entertainment, newspapers, magazines, etc.	\$ 0 _____	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0 _____	\$ _____
Life	\$ 0 _____	\$ _____
Health	\$ 15 _____	\$ _____
Motor Vehicle	\$ 0 _____	\$ _____
Other: _____	\$ 0 _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0 _____	\$ _____
Installment payments		
Motor Vehicle	\$ 0 _____	\$ _____
Credit card(s)	\$ 0 _____	\$ _____
Department store(s)	\$ 0 _____	\$ _____
Other: _____	\$ 0 _____	\$ _____
Alimony, maintenance, and support paid to others	\$ 0 _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0 _____	\$ _____
Other (specify): _____	\$ 0 _____	\$ _____
Total monthly expenses:	\$ 35 _____	\$ _____

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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.

Petitioner is a retired Indian citizen living at her husband's paternal home in Thiruvananthapuram.

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? _____

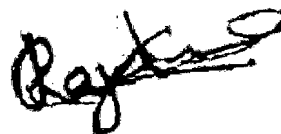
If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the costs of this case.

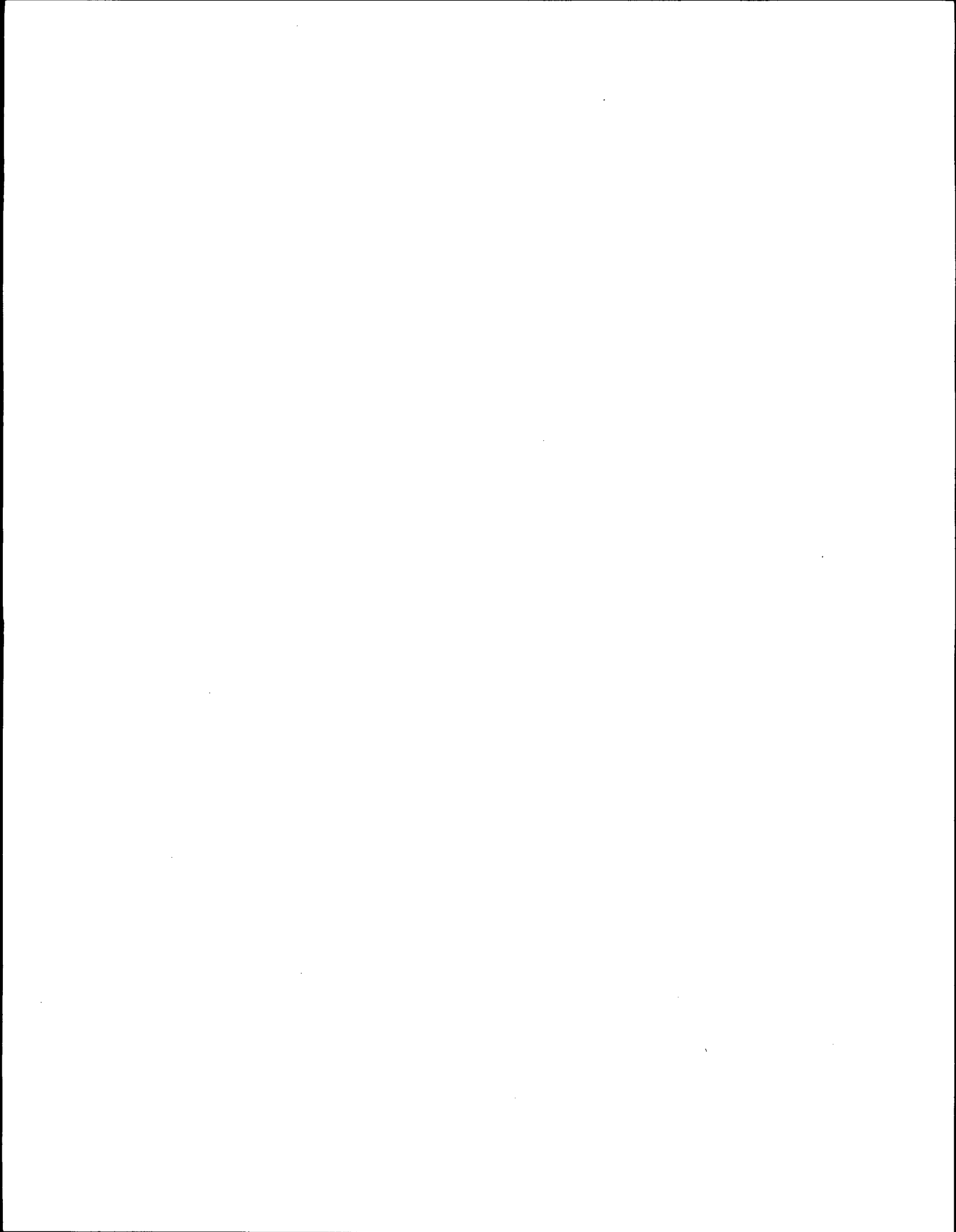
Petitioner is a retired Indian citizen living in a retirement group home in Thiruvananthapuram, Kerala, India. He has no income besides a small pension.

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

Executed on: February 18, 2026



(Signature)



No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

Jaykrishnan Nair, et al — PETITIONER
(Your Name)

VS.

Ermin Ciric, 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):

District of Nevada, Case # 2:24-cv-02255-APG-EJY

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.

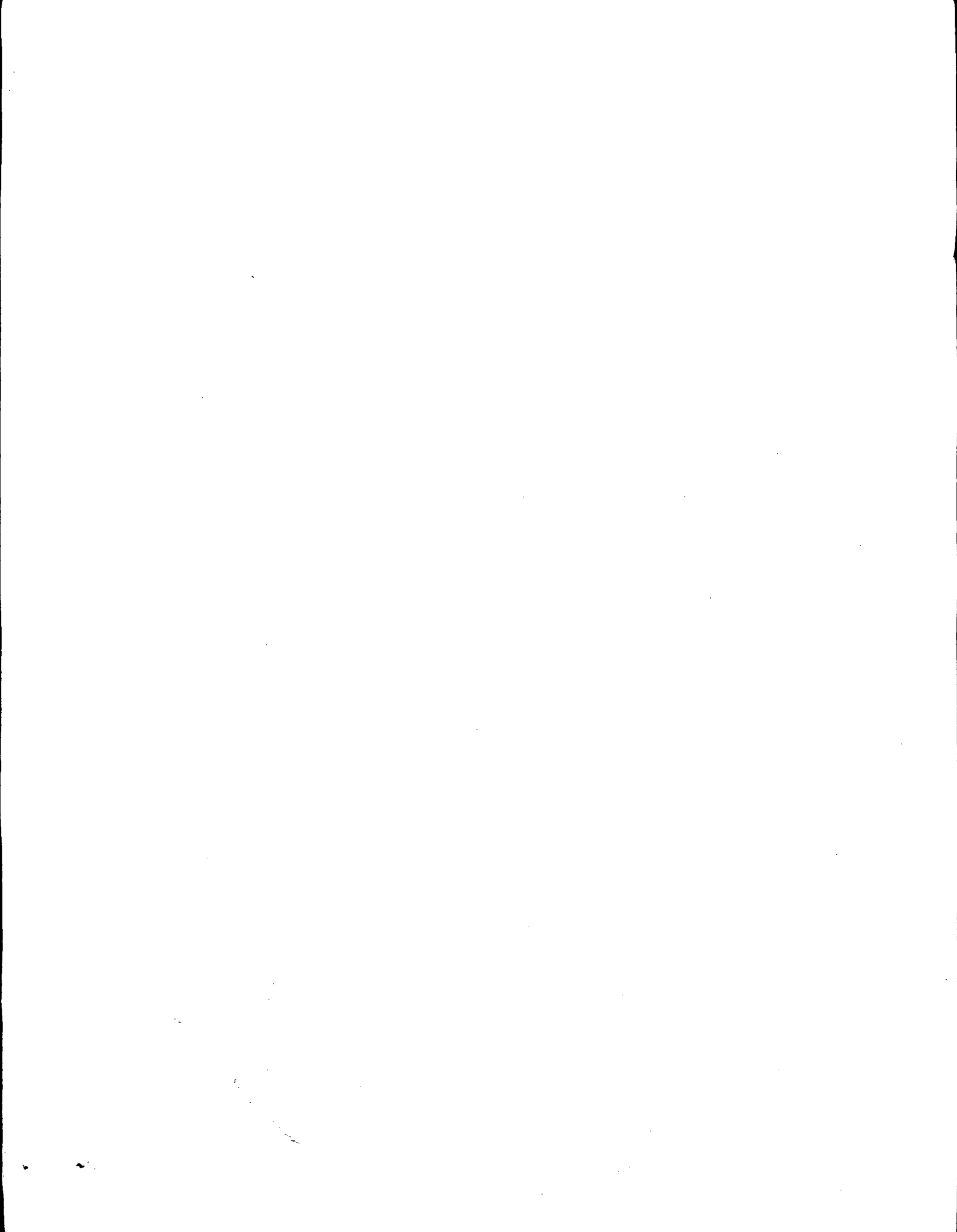
Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

The appointment was made under the following provision of law: _____, or

a copy of the order of appointment is appended.



(Signature)



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

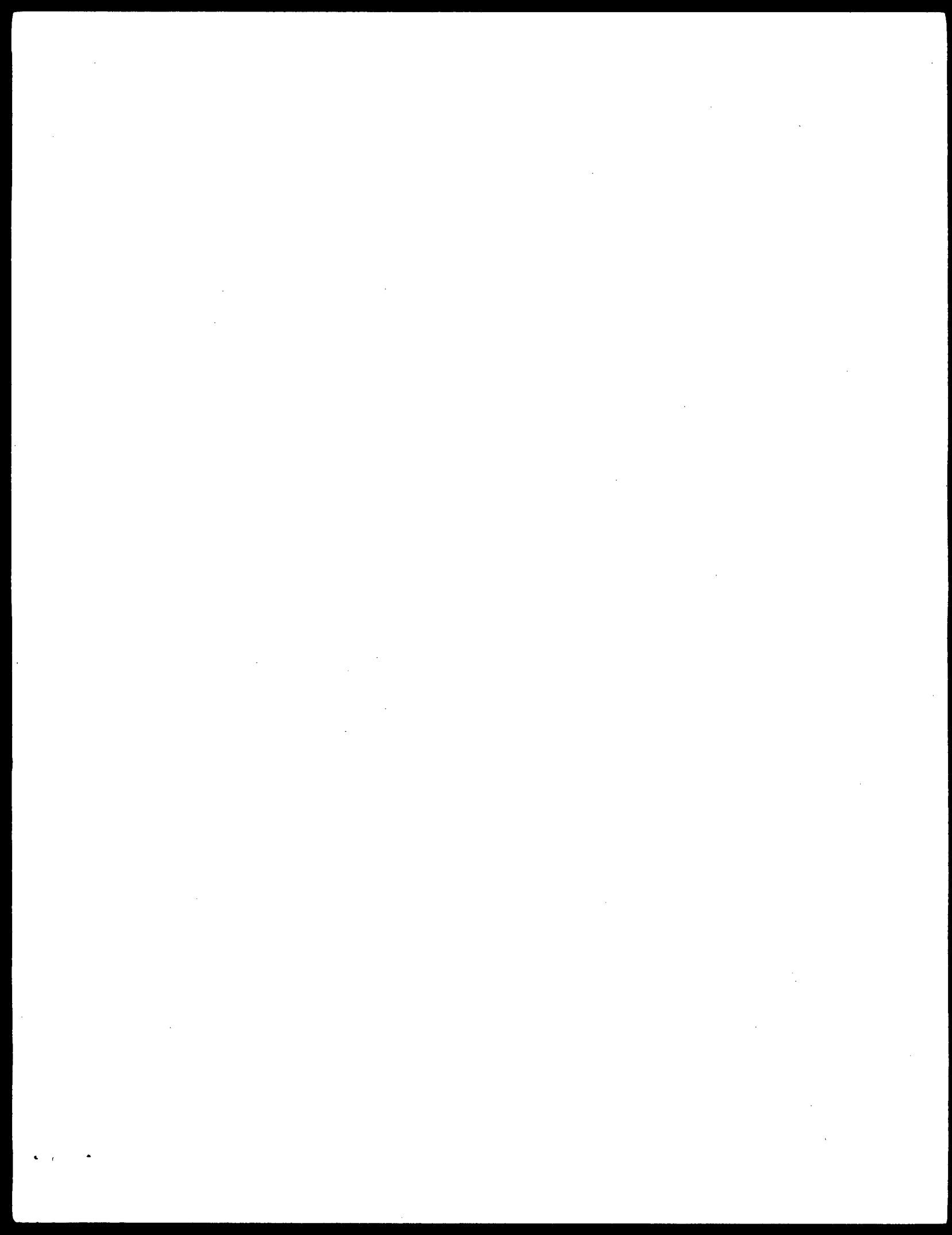
I, Jayakrishnan Nair, am the petitioner in the above-entitled case. In support of my motion to proceed *in forma pauperis*, I state that because of my poverty I am unable to pay the costs of this case or to give security therefor; and I believe I am entitled to redress.

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>	\$ _____	\$ _____
Self-employment	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Disability ¹ (such as social security, insurance payments)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ _____	\$ _____
Other (specify): <u>Food Stamps</u>	\$ <u>292</u>	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ <u>292</u>	\$ _____	\$ _____	\$ _____

1

My WA state disability is currently discontinued due to being out of state



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			\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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
N/A			\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

4. How much cash do you and your spouse have? \$ ~~50~~ - 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
Bank of America, Checking	\$ 50 - 0 - _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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

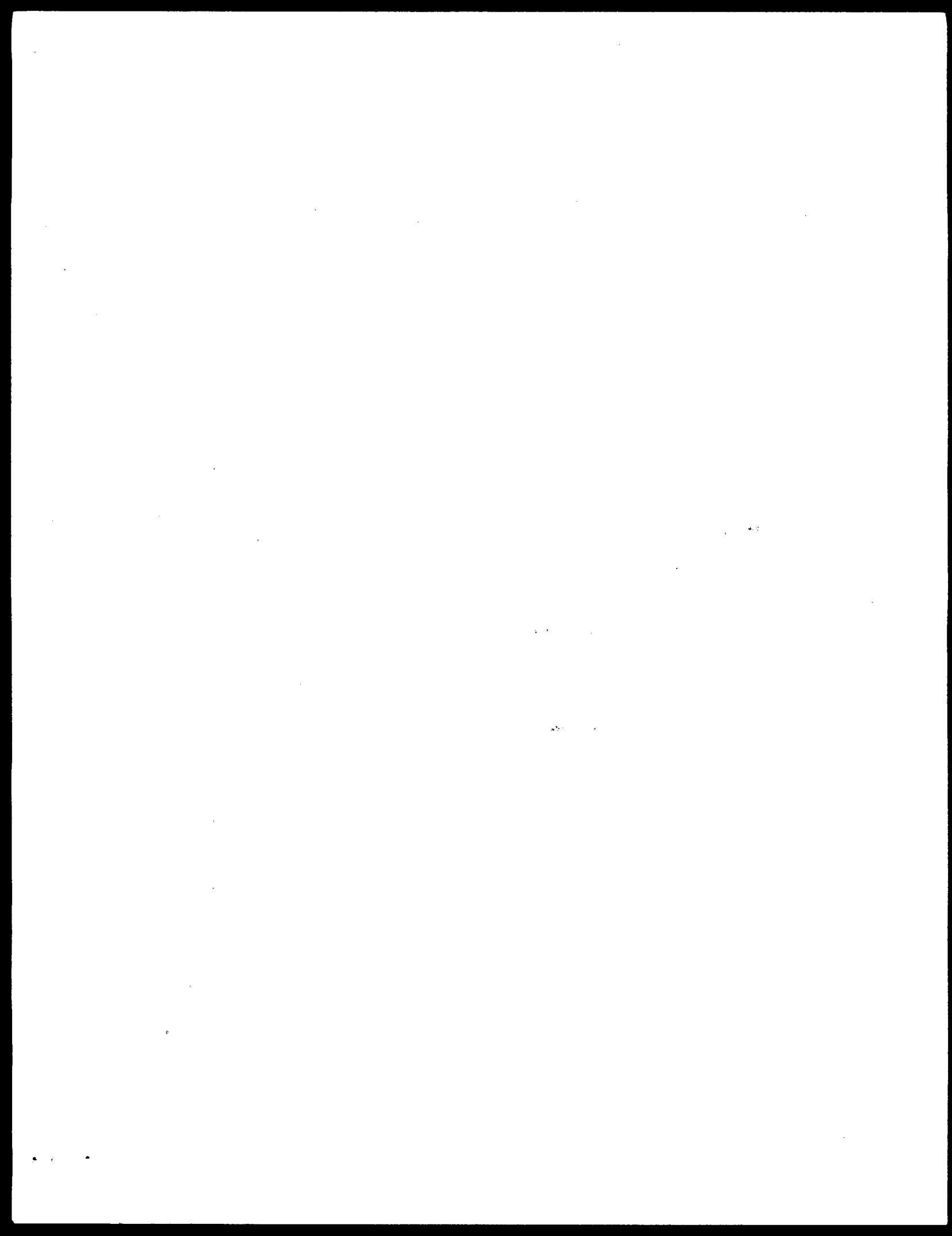
Home
Value N/A

Other real estate
Value N/A

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

Motor Vehicle #2
Year, make & model _____
Value _____

Other assets N/A
Description _____
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
N/A	\$ N/A	\$ N/A
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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
N/A	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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)	\$ 1000 - 0 -	\$ N/A
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>(currently not included staying</i>	
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>currently facing eviction) at a nursing home)</i>	
	<i>Medicaid provided service</i>	
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 32 (Fi cell service)	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ 200 (Food Stamp)	\$ _____
Clothing	\$ 0	\$ _____
Laundry and dry-cleaning	\$ 0	\$ _____
Medical and dental expenses	\$ 0 (Medicaid)	\$ _____

1950

1951

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 100 50	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 100 - 0 -	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$ _____
Life	\$ 0	\$ _____
Health	\$ 0	\$ _____
Motor Vehicle	\$ 0	\$ _____
Other: _____	\$ 0	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$ _____
Installment payments		
Motor Vehicle	\$ 0	\$ _____
Credit card(s)	\$ 0	\$ _____
Department store(s)	\$ 0	\$ _____
Other: _____	\$ 0	\$ _____
Alimony, maintenance, and support paid to others	\$ 0	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ _____
Other (specify): _____	\$ 0	\$ _____
Total monthly expenses:	\$ 100 82	\$ _____

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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.

I am a victim of judicial fraud as expounded on the writ. My only hope is justice in reclaiming my stolen homes and assets valued in millions. That is the purpose of this writ in the first place.

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 have recently went through a heart attack that required 7 stents, suffering from kidney problems and depression from the statement of facts described in the petition and am currently disabled and being kept alive in a nursing home. I have no income and all my assets have been stolen through fraud and corruption.

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

Executed on: February 18, 2026



(Signature)

