

No. \_\_\_\_\_

IN THE  
SUPREME COURT OF THE UNITED STATES

Robyn Abraham — PETITIONER  
(Your Name)

VS.

Abby Leigh, as Executrix of Mitch Leigh Estate, 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):

California Superior Court in Sealed Case

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~~ <sup>exists but is Not appended because</sup> ~~appended~~ <sup>Case is Sealed.</sup>

[Signature]  
(Signature)

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

I, Robyn Abraham, 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>1,200-</u>	\$ <u>—</u>	\$ <u>Same</u>	\$ <u>—</u>
Self-employment	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Income from real property (such as rental income)	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Interest and dividends	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Gifts	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Alimony	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Child Support	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>1600</u>	\$ <u>—</u>	\$ <u>1600</u>	\$ <u>—</u>
Disability (such as social security, insurance payments)	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Unemployment payments	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Public-assistance (such as welfare)	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Other (specify): _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>Total monthly income:</b>	\$ <u>2,800</u>	\$ <u>—</u>	\$ <u>2,800</u>	\$ <u>—</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
International Capital Solutions	94405m Blvd Suite 301 Beverly Hills, CA	2020 - Present	\$ 1,200.00
			\$
			\$

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.) *N/A - No Spouse*

Employer	Address	Dates of Employment	Gross monthly pay
			\$
			\$
			\$

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	\$ 650.00	\$
Savings	\$ 585.00	\$
	\$	\$

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>Monarch Care - Guardian of Late Mother</u>	<u>\$ 650,000.00</u>	<u>\$ _____</u>
<u>Abby Leigh</u>	<u>\$ Amount Filed by Arnold &amp; Paster in NYSD case in 17-05129</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>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</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>\$ 2,000-</u>	<u>\$ _____</u>
Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input 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>\$ 350.00</u>	<u>\$ _____</u>
Home maintenance (repairs and upkeep)	<u>\$ 100.00</u>	<u>\$ _____</u>
Food	<u>\$ 250.00</u>	<u>\$ _____</u>
Clothing	<u>\$ 150.00</u>	<u>\$ _____</u>
Laundry and dry-cleaning	<u>\$ 100.00</u>	<u>\$ _____</u>
Medical and dental expenses	<u>\$ Varies</u>	<u>\$ _____</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>600/month</u>	\$ <u>—</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>N/A</u>	\$ <u>—</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>200/month</u>	\$ <u>—</u>
Life	\$ <u>—</u>	\$ <u>—</u>
Health	\$ <u>—</u>	\$ <u>—</u>
Motor Vehicle	\$ <u>—</u>	\$ <u>—</u>
Other: _____	\$ <u>—</u>	\$ <u>—</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ <u>—</u>	\$ <u>—</u>
Credit card(s)	\$ <u>Varies</u>	\$ <u>—</u>
Department store(s)	\$ <u>—</u>	\$ <u>—</u>
Other: _____	\$ <u>—</u>	\$ <u>—</u>
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>N/A</u>	\$ <u>N/A</u>
<b>Total monthly expenses:</b>	<b>\$ <u>3750.00</u></b>	<b>\$ <u>N/A</u></b>

No. \_\_\_\_\_

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Robyn Abraham — PETITIONER  
(Your Name)

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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. <sup>exists but is Not appended because</sup> <sub>Case is Sealed.</sub>

[Signature]  
(Signature)

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

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Self-employment	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Income from real property (such as rental income)	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Interest and dividends	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Gifts	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
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Unemployment payments	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Public-assistance (such as welfare)	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
Other (specify): _____	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>	\$ <u>—</u>
<b>Total monthly income:</b>	\$ <u>2,800</u>	\$ <u>—</u>	\$ <u>2,800</u>	\$ <u>—</u>

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

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

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.) *N/A - No Spouse*

Employer	Address	Dates of Employment	Gross monthly pay
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

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	\$ 650.00	\$ _____
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5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

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Other assets Description N/A  
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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
Monarch Care - Guardian of Late Mother	\$ 650,000.00	\$ _____
Abby Leigh	\$ Amount Filed by Arnold & Poffe in NYSD case in 17-05189	\$ _____

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.

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Motor Vehicle	\$ <u>—</u>	\$ <u>—</u>
Other: _____	\$ <u>—</u>	\$ <u>—</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ _____
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Motor Vehicle	\$ <u>—</u>	\$ <u>—</u>
Credit card(s)	\$ <u>Varies</u>	\$ <u>—</u>
Department store(s)	\$ <u>—</u>	\$ <u>—</u>
Other: _____	\$ <u>—</u>	\$ <u>—</u>
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>N/A</u>	\$ <u>N/A</u>
<b>Total monthly expenses:</b>	\$ <u>3750.00</u>	\$ <u>N/A</u>

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.

*Due to Twenty Two Targeted LAWFARE legal, financial & physical attacks engineered by my ex-husband; his attorneys, my time is taken in litigation and protecting my safety.*

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.

*for my Affidavit, my violent ex-husband Dr Philip Dolin who is named in the Epstein files for child sex trafficking and sexually abusing my then 3 year old has engineered the filing of 22 LAWFARE cases to attempt to obfuscate his crimes. Thank you*

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

Executed: March 27, 2026

*[Handwritten Signature]*  
\_\_\_\_\_  
(Signature)

App No. \_\_\_\_\_

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In The  
Supreme Court of the United States

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ROBYN ABRAHAM

*Petitioner,*

v.

ABBY LEIGH, AS EXECUTRIX OF MITCH LEIGH ESTATE, ET AL.

*Respondents.*

**PROOF OF SERVICE**

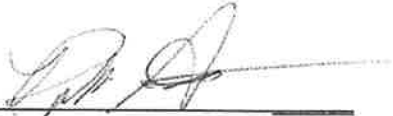
I, Robyn Abraham, do swear or declare that on March 27, 2026, as required by Supreme Court Rule 29 I have served the enclosed Motion for Leave to Proceed in Forma Pauperis, Motion to File Out of Time and Petition for Writ of Certiorari on each party to the above proceeding or that party's counsel, and on every other person required to be served, by depositing an envelope containing the above documents in the United States mail properly addressed to each of them and with first-class postage prepaid, or by delivery to a third party commercial carrier for delivery within 3 calendar days. The names and addresses of those served are as follows:

H. Robert Fiebach, Esq  
Cozen O'Conner  
1650 Market Street  
Philadelphia, PA 19103  
Telephone 215.665.4166

Tamar Wise, Esq.  
Cozen O'Conner  
175 Greenwich Street  
New York, NY 10007  
Telephone: 212.509.9400

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

Executed on March 27, 2026

By:   
Robyn Abraham