

No. **26-5756**

FILED
JUL 25 2026
OFFICE OF THE CLERK
SUPREME COURT, U.S.

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

JOHN J. PASTORE — PETITIONER
(Your Name)

VS.

TOM E. PASTORE — 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.

John J. Pastore
(Signature)

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

I, John J. Pastore, 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	\$0	\$N/A	\$0	\$N/A
Self-employment	\$0	\$N/A	\$0	\$N/A
Income from real property (such as rental income)	\$0	\$N/A	\$0	\$N/A
Interest and dividends	\$1.65	\$N/A	\$4.00	\$N/A
Gifts	\$0	\$N/A	\$0	\$N/A
Alimony	\$0	\$N/A	\$0	\$N/A
Child Support	\$0	\$N/A	\$0	\$N/A
Retirement (such as social security, pensions, annuities, insurance)	\$0	\$N/A	\$0	\$N/A
Disability (such as social security, insurance payments)	\$5,871.65	\$N/A	\$6,010.65	\$N/A
Unemployment payments	\$0	\$N/A	\$0	\$N/A
Public-assistance (such as welfare)	\$0	\$N/A	\$0	\$N/A
Other (specify): <u>None</u>	\$0	\$N/A	\$0	\$N/A
Total monthly income:	\$5,873.30	\$N/A	\$6,014.65	\$N/A

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
Self-employed auto repair work from home	Windham, Maine	Ended / wound down in 2023-2024	\$0
N/A	N/A	N/A	\$
N/A	N/A	N/A	\$0
			0

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 - divorced	N/A	N/A	\$N/A
N/A	N/A	N/A	\$N/A
N/A	N/A	N/A	\$N/A

4. How much cash do you and your spouse have? \$30
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
Evergreen Federal Credit Union account(s)	\$80	\$N/A
Navy Federal Credit Union account(s)	\$3,807	\$N/A
None	\$0	\$N/A

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

☒ Home

Value \$380,000 est.; see Att. A

☐ Other real estate

Value

☒ Motor Vehicle #1

Year, make & model 2011 Audi Q7

Value \$2,000 est.

☒ Motor Vehicle #2

Year, make & model 2012 Audi TT

Value \$7,900 est.

☐ Other assets

Description None

Value \$0

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
None	\$0	\$N/A
	\$0	\$N/A
	\$0	\$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
A.P. (full-time household)	Son	17
J.P.	Son	16
M.P. - see Att. A	Son	10

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)	\$2,300	\$N/A
Are real estate taxes included? ☒ Yes ☐ No		
Is property insurance included? ☒ Yes ☐ No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$1,055	\$N/A
Home maintenance (repairs and upkeep)	\$0	\$N/A
Food	\$1,150	\$N/A
Clothing	\$0	\$N/A
Laundry and dry-cleaning	\$0	\$N/A
Medical and dental expenses	\$50	\$N/A

	You	Your spouse
Transportation (not including motor vehicle payments)	\$375	\$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	\$110	\$N/A
Other: <u>None</u>	\$0	\$N/A
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>None</u>	\$0	\$N/A
Installment payments		
Motor Vehicle	\$0	\$N/A
Credit card(s)	\$500	\$N/A
Department store(s)	\$0	\$N/A
Other: <u>SBLI COVID loan</u>	\$125	\$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): <u>DHHS support withholding</u>	\$1,109.60	\$N/A
Total monthly expenses:	\$5,774.60	\$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? — \$82,737 total

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

Eric S. Thistle, Thistle Weaver & Morris, P.O. Box 7030, Portland, ME 04112, (207) 772-0303

Shelley P. Carter, Law Office of Shelley P. Carter, PA, 6 Willow Lane, Fryeburg, ME 04037, (207) 935-1950

Stephen Sweatt, Zerillo Law Firm, 1250 Forest Ave., Suite 3A, Portland, ME 04103, (207) 618-6555

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? — \$0 / N/A

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

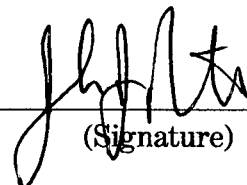
N/A

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

See Attachment A.

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

Executed on: September 21, 2026


(Signature)

No. _____

IN THE SUPREME COURT OF THE UNITED STATES

JOHN J. PASTORE, PETITIONER v. TOMI E. PASTORE, RESPONDENT

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

Question 1 - Income details

Source	Past 12-month monthly average	Expected next month
VA service-connected disability compensation	\$4,349.48	\$4,303.65
SSDI	\$2,522.17 (the \$30,266 one-time retroactive payment received August 3, 2026, divided by 12)	\$1,707.00 recurring
Total disability income	\$6,871.65	\$6,010.65
Interest and dividends	\$1.65	\$4.00
Total monthly income	\$6,873.30	\$6,014.65

The SSDI retroactive payment was a one-time receipt; it is not expected to recur. The form reports gross income. Petitioner's recurring SSDI benefit is \$1,707 per month before deductions. Social Security will withhold \$1,109.60 each month under the new DHHS support income-withholding order, leaving \$597.40 in net SSDI. Combined VA and net SSDI benefits actually received are \$4,901.05 per month. Current cash and account balances are disclosed in Question 4.

Question 5 - Home secured debt

The home at 32 Main Street, Windham, Maine, has an estimated current value of \$380,000 and an approximate mortgage balance of \$145,000.

Question 7 - Persons relying on Petitioner for support

A.P., Petitioner's 17-year-old son, has muscular dystrophy, lives with Petitioner full time, and is cared for by Petitioner. J.P., age 16, stays with Petitioner about two days weekly; Petitioner provides his food and helped him purchase, repair, and maintain a separate 2012 Audi Q7. Petitioner has never owned or held title to that vehicle. M.P., Petitioner's 10-year-old son, stays with Petitioner approximately three to four days per week and relies on Petitioner for support. Petitioner's 87-year-old mother relies, or is expected to rely, on Petitioner for care and support.

Question 8 - DHHS support income-withholding order

On August 3, 2026, Maine DHHS issued an Income Withholding Order to the Social Security Administration. The order lists \$306.00 per week in current child support, \$170.00 per month in past-due child support, and \$676.92 per week in current spousal support. Including the stated \$2 service fee, it identifies a total of \$1,022.15 per week and a monthly-pay-period amount of \$4,431.32, subject to applicable withholding limitations. Petitioner's gross recurring SSDI is \$1,707 per month. Social Security will withhold \$1,109.60 each month, leaving \$597.40 in net SSDI. Question 8 reports the \$1,109.60 amount that will actually be withheld rather than the larger amount stated in the order.

Question 9 - Expected changes

Yes. Petitioner's SSDI claim has been approved. He received a one-time retroactive payment of \$30,266 on August 3, 2026, and expects recurring gross SSDI of \$1,707 per month. Maine DHHS issued the support income-withholding order described above on August 3, 2026. Petitioner's caregiving and support responsibilities for his 87-year-old mother are also expected to increase.

Question 12 - Additional information

Petitioner is a 100% service-connected, permanently and totally disabled veteran. He has no current earned income and relies on VA disability compensation and SSDI. His gross recurring VA and SSDI benefits total \$6,010.65 per month. After the newly ordered \$1,109.60 monthly DHHS support withholding, Petitioner will receive \$597.40 in net SSDI, or \$4,901.05 in combined VA and net SSDI benefits each month. His stated average monthly expenses, including the withholding, are approximately \$6,774.60.

Petitioner currently has approximately \$30 in cash, \$80 at Evergreen Federal Credit Union, and \$3,807 at Navy Federal Credit Union. He also reports approximately \$145,000 remaining on his mortgage, \$24,000 in Navy Federal Credit Union credit-card debt, and \$38,000 on an SBLI COVID loan. Petitioner paid a total of \$82,737 to three attorneys in connection with the underlying divorce litigation, substantially depleting resources available for present household and filing expenses. The one-time SSDI retroactive payment and all current liquid balances are disclosed above and in Question 4.

Petitioner bears A.P.'s day-to-day support and care related to muscular dystrophy and receives none of the state adoption subsidy Respondent receives for A.P., who lives with Petitioner full time. Petitioner also supports J.P., age 16, approximately two days per week, and M.P., age 10, approximately three to four days per week.