

26-5936
No. _____

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

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

KEFIM DEXTER DAVID
Petitioner

v.

CHARLOTTE A. BURROWS, CHAIR,
EQUAL EMPLOYMENT OPPORTUNITY COMMISSION, et al.
Respondents

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):

United States Court of Appeals for the Fourth Circuit, Case No. 25-1538.

☐ 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.

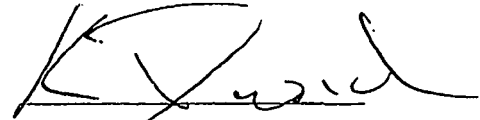
☐ Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

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☐ The appointment was made under the following provision of law:

OR

☐ A copy of the order of appointment is appended.



Kefim Dexter David
Petitioner, *Pro Se*

Dated: October 19, 2026

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

I, Kefim Dexter David, 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 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 Past 12 Months		Amount Expected Next Month	
	You	Spouse	You	Spouse
Employment	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Self-employment	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Income from real property	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Interest and dividends	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Gifts	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Alimony	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Child Support	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Retirement	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Disability	\$4,085.43	\$ N/A	\$ N/A	\$ N/A
Unemployment payments	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Public assistance	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Other	\$ N/A	\$ N/A	\$ N/A	\$ N/A
Total Monthly Income:	\$4,085.43	\$ N/A	\$ N/A	\$ 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
\$ N/A	\$ N/A	\$ N/A	\$ N/A
\$ N/A	\$ N/A	\$ N/A	\$ N/A
\$ N/A	\$ N/A	\$ N/A	\$ 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	\$ 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? \$0.00

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	Dates of Employment	Gross monthly Pay
Checking	\$ 0.00	\$ 0.00	\$ 0.00
Saving	\$ 0.00	\$ 0.00	\$ 0.00
\$ N/A	\$ N/A	\$ N/A	\$ 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:
☐ Other real estate	Value:
☒ Motor Vehicle #1:	Value: \$0.00 Totaled Attempt to avoid harassment
☐ Motor Vehicle #2	N/A
☐ Other assets	N/A

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 you
\$ N/A	\$ N/A	\$ N/A
\$ N/A	\$ N/A	\$ N/A
\$ 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	\$ N/A	\$ N/A
\$ N/A	\$ N/A	\$ N/A

\$ N/A	\$ N/A	\$ N/A
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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.

Expense	You	Spouse
Rent or home-mortgage payment	\$1,600.00	N/A
Utilities	\$150.00	N/A
Home maintenance	\$200.00	N/A
Food	\$400.00	N/A
Clothing	\$0.00	N/A
Laundry and dry-cleaning	\$50.00	N/A
Medical and dental expenses	\$0.00	N/A
Transportation (excluding vehicle payments)	\$300.00	N/A
Recreation/entertainment	\$30.00	N/A
Renter's/Homeowner's insurance	\$12.00	N/A
Life insurance	\$0.00	N/A
Health insurance	\$0.00	N/A
Motor vehicle insurance	\$500.00	N/A
Medicines	\$100.00	N/A
Taxes	\$0.00	N/A
Motor vehicle installment	\$700.00	N/A
Credit card(s)	\$100.00	N/A
Department store(s)	\$0.00	N/A
Alimony, maintenance, and support paid to others	\$500.00	N/A
Business/professional expenses	\$0.00	N/A
Legal	\$700.00	N/A
Other- Outstanding unpaid bills/debts	approximately (\$100,000)	N/A
Total Monthly Expenses	\$4,942.00	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

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? \$6,000.00

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

The Vaughn Law Firm
315 West Ponce de Leon Avenue, Suite 845
Decatur, GA 30030
Phone: (877) 615-9495

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? 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.

I am a disabled United States Army veteran proceeding pro se. The United States Court of Appeals for the Fourth Circuit previously granted me leave to proceed *in forma pauperis* in Case No. 25-1538. I have experienced prolonged financial hardships, including job loss and periods of housing instability, and I currently rely on limited disability income to meet my basic living expenses and substantial outstanding financial obligations.

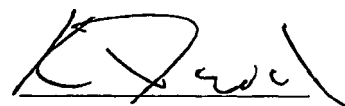
I have prosecuted this litigation without counsel while personally bearing the recurring costs of preparing, printing, copying, mailing, and otherwise pursuing extensive administrative and federal-court proceedings. As reflected elsewhere in this declaration, my monthly expenses exceed my available monthly income, and I have substantial unpaid financial obligations.

Paying the costs associated with this proceeding would further impair my ability to meet ordinary and necessary living expenses.

I respectfully request leave to proceed *in forma pauperis* pursuant to Supreme Court Rule 39.

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

Executed on October 19, 2026



Kefim Dexter David
Petitioner, Pro Se