26-6112 ORIGINAL

No. _____

FILED
SEP 01 2026
OFFICE OF THE CLERK
SUPREME COURT, U.S.

IN THE

SUPREME COURT OF THE UNITED STATES

KATHRYN DRESSLER — PETITIONER
(Your Name)

VS.

STATE OF FLORIDA, 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):
FL 17th Cir. (Broward); FL 11th Cir. (Miami); FL 3rd DCA; FL 4th DCA; US Dist. Ct., S.D. GA (31983); US Dist. Ct., S.D. FL (IFP on appeal)

☐ 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, KATHRYN DRESSLER, 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	$ Ø	$ UNK- See Q12	$ Ø	$ NA
Self-employment	$ Ø	$ UNK	$ Ø	$ NA
Income from real property (such as rental income)	$ Ø	$ UNK	$ Ø	$ NA
Interest and dividends	$ Ø	$ UNK	$ Ø	$ NA
Gifts	$ Ø	$ UNK	$ Ø	$ NA
Alimony	$ Ø	$ UNK	$ Ø	$ NA
Child Support	$ Ø	$ UNK	$ Ø	$ NA
Retirement (such as social security, pensions, annuities, insurance)	$ Ø	$ UNK	$ Ø	$ NA
Disability (such as social security, insurance payments)	$ Ø	$ UNK	$ UNKNOWN- SSA PENDING	$ NA
Unemployment payments	$ Ø	$ UNK	$ Ø	$ NA
Public-assistance (such as welfare)	$ Ø	$ UNK	$ Ø	$ NA
Other (specify): _____	$ Ø	$ UNK	$ Ø	$ NA
Total monthly income:	$ Ø	$ UNK- See Q12	$ Ø	$ NA

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
NONE - UNABLE TO WORK OUT TO DISABILITY	NA	NA	$ NA
			$
			$

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
UPS	UNK - SEE Q12	UNK	$ UNK
			$
			$

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
BANK OF AMERICA CHECKING *	$ ~1,000	$ UNK - SEE Q12
	$	$
	$	$

* OFFSET BY ACCUMULATED CREDIT CARD DEBT - SEE Q12

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

☑ Home
Value UNK - SEE Q12
* not liquid

☐ Other real estate
Value _____

☑ Motor Vehicle #1
Year, make & model 2022 HONDA CRV
Value UNK - SEE Q12
* not liquid

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

☐ Other assets
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
SSA	$UNK-SEE Q12	$N/A-DIVORCED
	$	$
	$	$

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.G.	DAUGHTER	7

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) Are real estate taxes included? ☐ Yes ☑ No Is property insurance included? ☐ Yes ☑ No	$ Ø	$UNK/NA
Utilities (electricity, heating fuel, water, sewer, and telephone)	$ ~$300	$UNK/NA
Home maintenance (repairs and upkeep)	$ ~$50	$UNK/NA
Food	$ ~$400	$UNK/NA
Clothing	$ ~$50	$UNK/NA
Laundry and dry-cleaning	$ ~$25	$UNK/NA
Medical and dental expenses	$ ~$500	$UNK/NA

	You	Your spouse
Transportation (not including motor vehicle payments)	$~150	$UNK/NA
Recreation, entertainment, newspapers, magazines, etc.	$0	$UNK/NA
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	$~95	$UNK/NA
Life	$0	$UNK/NA
Health	$0	$UNK/NA
Motor Vehicle	$~130	$UNK/NA
Other: _____	$0	$UNK/NA
Taxes (not deducted from wages or included in mortgage payments)		
(specify): PROPERTY TAXES	$~300	$UNK/NA
Installment payments		
Motor Vehicle	$0	$UNK/NA
Credit card(s)	$~400	$UNK/NA
Department store(s)	$0	$UNK/NA
Other: _____	$0	$UNK/NA
Alimony, maintenance, and support paid to others	$0	$UNK/NA
Regular expenses for operation of business, profession, or farm (attach detailed statement)	$0	$UNK/NA
Other (specify): UNK - SEE Q12	$	$UNK/NA
Total monthly expenses:	$~2400	$UNK/NA

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.

SEE ATTACHED SUPPLEMENT, Q9

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.

SEE ATTACHED SUPPLEMENTAL DECLARATION, INCORPORATED HEREIN

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

Executed on: OCTOBER 29, 2026

[signature]

(Signature)

No. _____

IN THE SUPREME COURT OF THE UNITED STATES

KATHRYN STILLWELL DRESSLER, Petitioner

v.

STATE OF FLORIDA, ET AL., Respondents

On Petition for a Writ of Certiorari Before Judgment (Rule 11)
Underlying Eleventh Circuit No. 26-12643

SUPPLEMENTAL ANSWER SHEET AND DECLARATION IN SUPPORT OF RULE 39 FINANCIAL AFFIDAVIT

Attachment to affidavit executed October 29, 2026 (Questions 1–9 and 12)

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Cases: Adkins v. E.I. DuPont de Nemours & Co., 335 U.S. 331 (1948) 8

Statutes: 28 U.S.C. § 1915(a)(1) 8

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Rules: Supreme Court Rule 11 1

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Rules: Supreme Court Rule 39.3 2, 8

I. PURPOSE OF THIS SWORN DECLARATION — RULE 39.3 IMPOSSIBILITY

1. I submit this sworn declaration to establish the concrete impossibility of independently complying with specified Supreme Court filing and preparation requirements, pursuant to Rule 39.3.
2. My inability results from federally adjudicated disability, documented functional impairments, indigency, an expressly incomplete appellate party list, and the absence of identified opposing counsel.
3. Repeated attempts to reconstruct, assemble, and complete these requirements cause further debilitating physical and psychological injury.
4. These are documented barriers to compliance, not mere inconvenience or unwillingness.
5. I therefore invoke Rule 39.3's express impossibility provision and its direction that due allowance be made for pro se litigants.
6. Because Rule 29 imposes a separate service obligation, I also request judicial consideration of a legally authorized and accessible means of accomplishing service without falsely certifying that it has occurred.

II. WHY THE BACKGROUND INFORMATION IS NECESSARY TO EXPLAIN MY FINANCIAL ANSWERS

7. I am federally determined disabled. On August 7, 2026, the Social Security Administration issued a fully favorable decision finding disability beginning November 1, 2021.

8. I have had no employment earnings since June 2024.

9. The federal decision and supporting assessments document functional limitations in sustained attention, memory, information processing, adapting to stress, and managing complex tasks.

10. I identify only these functional effects, not confidential testing scores, medications, or detailed treatment information.

11. I am also a documented victim of domestic violence. My former spouse, Paul Gawor, entered a guilty plea in Broward County Criminal Case No. 22002865MM10A involving domestic-violence battery committed in the presence of our minor daughter, herself a minor-child victim. Separate protective-injunction proceedings were brought for her (DVCE22003027) and for me (DVCE22003026).

12. My treating Georgia clinician and the SSA psychological examiner have independently documented trauma-related impairment and serious difficulty sustaining attention, handling stress, and managing ordinary responsibilities as a direct result of court proceedings and the ongoing concealment of my child.

13. On May 27, 2025, three armed Georgia law-enforcement officers stalked and located my daughter and me at a McIntosh County hotel while we were visiting my mother, Patricia Dressler, and forcibly seized my child under threat of armed force.

14. I have never been served with an order authorizing that seizure, and no lawful basis was explained or ever provided to me. My daughter, a Georgia resident, had recently been hospitalized and required continuing care. Her interstate removal, continuing isolation, and our ongoing forced separation have inflicted daily harm that has not abated.

15. This history is essential to the financial affidavit for a specific reason: the transactions the Court asks me to reconstruct are inseparable from those events.

16. The requested reporting periods include my family bereavements, cessation of work, sale of my inherited Florida home, relocation to Georgia, sale or loss of belongings, intermittent assistance, loss of healthcare coverage, and mounting litigation costs.

17. Reconstructing those years requires me to repeatedly revisit the same events associated with my documented deterioration. Each renewed demand triggers retraumatization, physical flare-ups and excruciating pain, fatigue, and impaired concentration; prolonged record searches and calculations can become physically debilitating.

18. Repeating the exercise does not restore information that I cannot reliably retrieve or verify.

19. My ability to describe what happened and advocate for my rights does not mean I can independently identify every historical transfer, determine its legal or accounting category, calculate a twelve-month average, obtain accounts outside my control, or certify precise figures under penalty of perjury.

20. My capacity fluctuates. In a September 24, 2026 written SSA request I explained the same barriers and sought specific written questions, manageable portions, and time to respond.

21. This attachment is my good-faith method of disclosing what I know while identifying what I presently cannot know with sufficient reliability.

III. ANSWERS CLARIFYING QUESTIONS 1–9 AND 12 OF THE PRESCRIBED AFFIDAVIT

22. Questions 1, 2, and 9 (income and benefits): I have earned no employment or self-employment income since June 2024; earlier freelance writing and marketing did not amount to substantial gainful activity.

23. The August 2026 SSA disability finding is not itself proof of the amount or availability of an SSI payment. SSA requested further SSI eligibility information on September 10, 2026, and I responded on September 24.

24. Any future payment or arrears remain uncertain; the "Yes" in Question 9 identifies that possibility, not cash currently available for filing costs.

25. Question 1 (assistance and other receipts): I have sometimes survived through credit-card borrowing, sales of personal possessions, and intermittent help from family or friends, including payments made directly to creditors.

26. These were not regular employment earnings or predictable monthly gifts. I cannot reliably reconstruct which items occurred within each twelve-month period, distinguish every loan, sale, gift, or transfer, or calculate an accurate monthly average.

27. A zero entered on a regular-income line is not intended to deny that occasional assistance occurred; where the form calls for an average of cash gifts actually received, the exact figure is presently UNKNOWN, not affirmatively established as zero. SNAP benefits are noncash nutritional assistance, not wages.

28. Questions 1, 3, 4, and 8 (former spouse): I am divorced from Paul Gawor, did not maintain joint accounts with him, and do not possess or control his financial records.

29. I understand he was employed by UPS at one time but cannot verify his past two-year earnings, assets, or balances. "UNK," "UNKNOWN," and "N/A—DIVORCED" mean unavailable information or no current spouse; they do not mean that his finances were zero.

30. Questions 4–6 (assets and possible sums owed): My Bank of America checking balance was estimated at approximately $1,000 and fluctuates.

31. The separate cash-on-hand space was not intended to imply additional undisclosed funds; I cannot responsibly certify a different precise figure.

32. I disclosed my principal home in Darien, Georgia, acquired using remaining proceeds from my inherited Florida property, and my necessary 2022 Honda CR-V.

33. They are assets, not currently liquid income; I cannot reliably estimate market values without valuations. Possible SSA arrears are unquantified and not presently established as funds available to pay fees.

34. Questions 7 and 8 (daughter, expenses, and debt): A.G. is my seven-year-old daughter, from whom I have remained forcibly separated since May 2025. Her inclusion does not suggest she presently resides with me or that I pay every current expense; disputed support obligations do not establish my ability to pay.

35. My approximately $2,400 in monthly necessities comprises utilities $300, home maintenance $50, food $400, clothing $50, laundry $25, medical/dental $500, transportation $150, homeowner's insurance $95, vehicle insurance $130, property taxes $300, and credit-card payments $400.

36. These are estimated needs and obligations, not proof of income.

37. I have approximately $70,000 in credit-card debt.

38. My home has no mortgage, but annual taxes are estimated at $3,000–$4,000, plus insurance and maintenance.

39. Irregular medical and litigation expenses—including approximately $1,000 for a Broward appellate record—are not fully captured by that monthly estimate.

40. Question 12 (prior indigency and continuing need): I received leave to proceed in forma pauperis in Southern District of Georgia Case No. 2:26-cv-00045 in June 2026 and made IFP submissions in Southern District of Florida Case No. 0:26-cv-60609 and Eleventh Circuit No. 26-12643.

41. Those proceedings do not bind this Court. Nevertheless, the absence of earnings, substantial debt, essential shelter and transport costs, unstable medical expenses, and the limitations explained above leave me unable to prepay Supreme Court filing costs without sacrificing necessities.

IV. GOOD-FAITH DISCLOSURE AND LIMITED REQUEST UNDER RULE 39

42. I do not ask to be excused from truthful disclosures or to conceal assets.

43. I ask that this sheet be read as part of my unchanged, signed October 29 financial affidavit, including the explanations of estimates, blanks, and "UNKNOWN" entries.

44. Under 28 U.S.C. § 1915(a)(1) and Adkins v. E.I. DuPont de Nemours & Co., 335 U.S. 331, 339–40 (1948), IFP eligibility does not require absolute destitution or sacrificing the necessities of life.

45. My ability to pay should be assessed from funds actually accessible to me, in light of necessary expenses and the functional limits on financial reconstruction.

46. Rule 39.3 calls for due allowance for a person appearing pro se, while retaining the Court's filing requirements.

47. I respectfully request:

    (a) acceptance of this attachment as a continuation of my Rule 39 disclosure;

    (b) leave to proceed in forma pauperis; and

    (c) if a material answer remains insufficient, written identification of the particular question, period, or transaction needed and a reasonable opportunity to respond in manageable written parts.

48. Requiring repeated open-ended reconstruction aggravates my documented disabilities and causes disabling physical pain without making uncertain figures reliable.

49. I have deliberately withheld detailed medical records from this public submission and can provide necessary, appropriately redacted supporting pages if specifically requested.

50. This sheet neither changes the petition nor combines it with a separate application for emergency relief.

IDENTIFIED EXHIBIT AND SOURCE RECORDS (NOT ENCLOSED)

A. SSA Fully Favorable Decision, August 7, 2026 (disability onset November 1, 2021).

B. William F. Corey, Ph.D., SSA consultative psychological evaluation, May 18–19, 2026.

C. Heather Jackson, LPC, clinical letters dated July 30 and October 2, 2025 (with November 13, 2025 addenda).

D. SSA SSI-processing notice dated September 10, 2026, and my written disability-access response dated September 24, 2026.

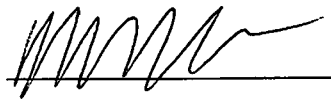
E. Supreme Court Clerk return letter dated October 26, 2026, and my executed October 29, 2026 Rule 39 forms.

These records are identified to preserve the supporting sources previously referenced. Sensitive clinical and identifying details are not enclosed with this public filing. Redacted supporting pages can be provided if specifically required.

DECLARATION UNDER PENALTY OF PERJURY

I declare under penalty of perjury under the laws of the United States of America that the foregoing factual statements based on my personal knowledge are true and correct; record descriptions are based on the identified court and medical documents. 28 U.S.C. § 1746.

Executed on: OCTOBER 30, 2026

Signature: 

Kathryn Dressler