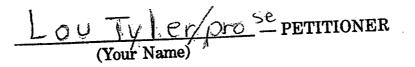
No. _____

IN THE

SUPREME COURT OF THE UNITED STATES



VS. UCWENLOGN SPRVICES - RESPONDENT(S) DEUTSCHE BANK und Trust DEUTSCHE BANK und Trust MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS 16-11596

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

[] Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s): A = A

None None

[1] 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.

(Signature)

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

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I, $\underline{\Box \cup \Box \downarrow \Box \Box \downarrow}$, and 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.

	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$_O	\$_ <u>W/A</u>	\$	<u>\$ N/A</u>
Self-employment	\$	\$_ <u>1V//A</u> _	\$_ <u>Ô</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$	\$_ <u>IN/A</u> _	\$	\$_N/A
Interest and dividends	\$	<u>s_N/A</u>	\$ <u>Ö</u>	<u>\$_N/A</u>
Gifts	\$	\$_!N/A_	\$	<u>\$ N/A</u>
Alimony	\$Ô	\$_ <u>N/</u> A	<u>\$</u>	\$ N/A
Child Support	\$	\$ N/A	<u>\$_0</u>	<u>\$ N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ 375	\$ <u>N</u>]A	\$375	\$_ <u>N' A</u> _
Disability (such as social security, insurance payme	snts)	\$_N/A_	<u>\$ 395</u>	<u>s N/A</u>
Unemployment payments	\$	<u>\$ N/A</u>	\$ 0	\$_M/A
Public-assistance (such as welfare)	\$ <u>()</u>	<u>\$_N/A_</u>	\$ <u>0</u>	\$_N/A_
Other (specify): <u>SNAM</u>	p s (\$_ <u>N/A</u> _	\$Ò	<u>\$_/\/ A</u>
SEE ATTACH,		\$_ <u>N/A</u> _	\$ 770	\$ <u>V</u> (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	Gross monthly pay
None None None	None None	Employment None Wone	\$ \$ \$

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	Gross monthly pay
$\frac{N/A}{N/A}$	N/A M/A	Employment <u>NV / A</u> <u>A</u> A A A A	\$ <u>N/A</u> \$ <u>N/A</u> \$
		<u></u>	<i>♥/♥</i>

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

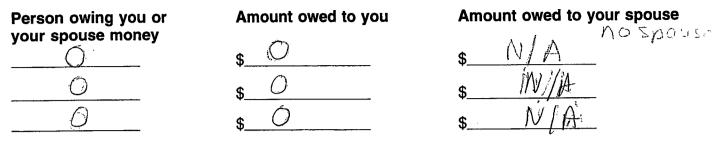
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
None	Nare	\$ <u>0</u>	\$_ <u>N/</u> /#A
None	None.	\$	\$ <u>//A</u> A
None	1None	\$O	\$ <u>N/A</u> -

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

$\Box Home \qquad \swarrow On \notin \\ Value \qquad \bigcirc$	□ Other real estate Value <u>Nune</u> -0-
□ Motor Vehicle #1 Year, make & model Value	□ Motor Vehicle #2 Year, make & model <u>NAON &</u> Value
□ Other assets Description	

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



7. State the persons who rely on you or your spouse for support.

Name	Relationship	م Age
M. Tyler	grandidaughter	16
Q. Tyler	grandson	° 177
N/A	W//A	N/A
/ .	<i>i j j</i> ²	217

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? Is property insurance included? Yes N	o N/A • N/A	<u>\$</u> A
Utilities (electricity, heating fuel, water, sewer, and telephone) See attach a	neats \$ 487	\$ <u>N/A</u>
Home maintenance (repairs and upkeep)	\$ 150	<u>\$N/A</u>
Food	<u>\$ 350</u>	<u>\$ N/A</u>
Clothing	\$	<u>\$_N/A_</u>
Laundry and dry-cleaning	\$ 100	<u>\$_N/A_</u>
Medical and dental expenses	\$ 75	\$ <u>N/A</u>

Transportation (not including motor vehicle payments)	\$ 75	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$	s_N/A
Insurance (not deducted from wages or included in mortg	gage payments)	
Homeowner's or renter's	\$	\$ N/A
Life	\$	\$ DIA
Health	\$ <u>`</u> ````	\$ IN/A
Motor Vehicle	s ()	\$ NAA
Other: N/A	\$ \$	s N/A
Taxes (not deducted from wages or included in mortgage	navments)	+ <u>k</u>
,		my P.A
(specify)://////	\$	\$ <u></u>
Installment payments		
	. 0	MARA
Motor Vehicle	\$	\$ <u></u>
Credit card(s)	\$	\$N/_A
Department store(s)	\$	\$A
Other:	\$ <u></u>	\$ IN/A
Alimony, maintenance, and support paid to others	\$	<u>s_N/A_</u>
		1
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	<u>\$ M/A</u>
Other (specify):	<u>\$</u>	\$ INAA
	1220	MILA
Total monthly expenses:	\$ 1, 221	\$ <u>IV P</u>

Your spouse

You

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

If yes, describe on an attached sheet. \Box 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 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 No If yes, how much? _____/AIf 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 am a 65 year old wonan who is disabled and only nece ives \$395 disability and \$375 Social security. I have 6stepporos issand rheu matoid arthritis, back, neck, Knee, head pains Cataracts, etc.

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

Executed on: 1 = 29 - 18, 2018 Fanvary 29, 2018 5-4-18 (Signature)