IN THE

SUPREME COURT OF THE UNITED STATES

Lou Ty er pro se PETITIONER (Your Name)
Ocwen Loan Sprvices Respondents 16-11295 Deutsche Bant and Trust 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. [] Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):
None
Petitioner has not previously been granted leave to proceed in forma
Petitioner's affidavit or declaration in support of this motion is attached hereto. (Signature) May 4, 2018
May 4, 2018

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

I, ______, 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.

	Average monthly amonthly amonths	ount during	Amount expected next month	
	You	Spouse	You	Spouse,
Employment	\$	s NA	\$	\$ <u>N/A</u>
Self-employment	\$	\$ N//A	\$ <u> </u>	\$_ <i>N/A</i>
Income from real prope (such as rental income		\$ <u>N/A</u>	\$	\$ <u>N/A</u>
Interest and dividends	\$	\$ N/A	\$ <u>Ö</u>	\$ N/A
Gifts	\$	\$ NA	<u>\$</u>	\$ N/A
Alimony	\$	\$ N/A	\$	\$ N/A
Child Support	\$ 0	\$ N /A	\$ <u> </u>	\$ N/A
Retirement (such as soc security, pensions, annuities, insurance)	cial \$ <u>375</u>	s N/A	\$3.75 <u>.</u>	s N/A
Disability (such as socia security, insurance pay		s N/A	\$ <u>395</u>	\$_ <i>N/A</i>
Unemployment paymen	ts \$	\$ N/A	\$0	s <i>M/A</i>
Public-assistance (such as welfare)	\$	\$ N/A	\$ <u>O</u> :	\$ N/A
Other (specify): 5N/	P \$ 0	\$ N/A	\$	s W/A
(SEE ATTA C	6 a A	s <i>N</i> /A	\$770	s N (A

2. List your employme is before taxes or other.		t two years, most rece	ent first. (Gross monthly pay
Employer	Address	Dates of Employment	Gross monthly pay
None	<u>None</u>	<u>Wônê</u>	\$
None None	None	<u>None</u> None	5
10 0 10 0	1,000		V
3. List your spouse's 6 (Gross monthly pay	employment history for is before taxes or other	or the past two years er deductions.)	s, most recent employer first.
Employer	Address	Dates of	Gross monthly pay
A1 / A	x e 1 A	Employment	WI /A
$\frac{1\sqrt{H}}{2\sqrt{H}}$	<u> </u>		\$
$\frac{1\sqrt{P}}{N/R}$	1V/14	- AT I I A	\$ \\ \(\lambda \) \\ \
——————————————————————————————————————			
4. How much cash do y Below, state any moinstitution.	ou and your spouse had ney you or your spou	ave? \$ use have in bank acco	unts or in any other financial
Financial institution	Type of account	Amount you have	Amount your spouse has
None	<u> </u>	\$	\$_\(\frac{1}{A}\)\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
None	- None	\$ 0	\$ 10/14-1 C #6/1/A
None	<u> Wone</u>	5	Φ
5. List the assets, and and ordinary househ		ou own or your spous	se owns. Do not list clothing
□ Home Non€		☐ Other real esta	ate
ValueO	•	Value Mar	
varae			
☐ Motor Vehicle #1 Year, make & model	Nane	☐ Motor Vehicle Year, make &	#2 model <u> </u>
Value		ValueO	
, and			
Other assets Description	NP.		
	* C		
Value			

Person owing you or	Amount owed to you	Amount owed to your spouse				
your spouse money	s O	s N/A				
Ö	• 0	s N/A				
0	\$	\$ N/A				
7. State the persons who rely on you or your spouse for support.						
Name	Relationship	Age				
M. lyter	grandid aughi	2/17				
A / /A	grandson °17 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.						
·	Υ	ou Your spouse				
Rent or home-mortgage pay		0 s N/A				
(include lot rented for mobil	e home) $$$ ded? \square Yes \square No N/A	<u> </u>				
(include lot rented for mobil Are real estate taxes included in the second in the s	e home) ded? \square Yes \square No \nearrow/\nearrow ded? \square Yes \square No \nearrow/\nearrow	φ				
(include lot rented for mobil Are real estate taxes included in the second in the s	e home) ded? Yes No N/A ded? Yes No N/A fuel, See attach ments \$	φ				
(include lot rented for mobil Are real estate taxes included Is property insurance included Utilities (electricity, heating water, sewer, and telephone	e home) ded? Yes No N/A ded? Yes No N/A fuel, See attach ments \$	φ				
(include lot rented for mobil Are real estate taxes included in the Isproperty insurance included Utilities (electricity, heating water, sewer, and telephone Home maintenance (repairs)	e home) ded? Yes No N/A ded? Yes No N/A fuel, See attach ments \$	φ				
(include lot rented for mobile Are real estate taxes included in the second of the sec	e home) ded? Yes No N/A ded? Yes No N/A fuel, See attach ments \$	φ				
(include lot rented for mobile Are real estate taxes included in the second of the sec	e home) ded?	φ				

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	You	Your spouse			
Transportation (not including motor vehicle payments)	\$ 75	s N/A			
Recreation, entertainment, newspapers, magazines, etc.	\$	* NAA			
Insurance (not deducted from wages or included in mortgage payments)					
Homeowner's or renter's	\$	\$			
Life	\$	\$ / N/A			
Health	\$ <u>.O</u>	\$ /N/A			
Motor Vehicle	\$	\$ N/A			
Other:	\$	\$ N/A			
Taxes (not deducted from wages or included in mortgage payments)					
(specify):	\$ <u>Ö</u>	\$ N/A			
Installment payments	·				
Motor Vehicle	\$ <i>Ö</i>	\$ W/A			
Credit card(s)	<u>\$</u>	\$ N/A			
Department store(s)	\$ 0	\$ N//A			
Other:	\$ <u>(Ö</u>	\$ / N/A			
Alimony, maintenance, and support paid to others	\$ <i>_</i>	* N/A			
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$ N/A			
Other (specify):	<u>\$</u>	\$ N / A			
Total monthly expenses:	\$ 1,337	* 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? ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
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:
MA
12. Provide any other information that will help explain why you cannot pay the costs of this case. I am a 65 year old woman who is disabled and only neceives \$395 disability and \$375 50c/a/security. I have 05 teoporos is and rheu matoid with ritis, back, neck, knee, head pains Cataracts, etc. I declare under penalty of perjury that the foregoing is true and correct.
Executed on: $1 = 29 - 18$, 20.18
Fanvary 29, 2018 (Signature)
(Digitature)