

19-6782

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

ORIGINAL

ADRIENNE MALLARD — PETITIONER

Supreme Court, U.S.
FILED
OCT 30 2019
OFFICE OF THE CLERK

VS.

NEXT DAY TEMPS / MODEL HOME TEMPS, ACCIDENT FUND GENERAL
INSURANCE COMPANY, 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):

Court of Special Appeals of Maryland

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:

a copy of the order of appointment is appended.

Adrienne Mallard

(Signature)

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

I, Adrienne McHard, 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	\$ ↓	\$ 0	\$ ↓
Income from real property (such as rental income)	\$ 0	\$ ↓	\$ 0	\$ ↓
Interest and dividends	\$ 0	\$	\$ 0	\$
Gifts	\$ 0	\$	\$ 0	\$
Alimony	\$ 0	\$	\$ 0	\$
Child Support	\$ 0	\$	\$ 0	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ 500	\$	\$ 0	\$
Disability (such as social security, insurance payments)	\$ 0	\$	\$ 0	\$
Unemployment payments	\$ 0	\$	\$ 0	\$
Public-assistance (such as welfare)	\$ 0	\$	\$ 0	\$
Other (specify): <u>Food Assistance</u>	\$ 170	\$	\$ 170	\$
Total monthly income:	\$ 170	\$	\$ 170	\$

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
Redfin	Columbia, MD	November 2016- July 2017	\$500.00 (P/T Contract ave)

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			

4. How much cash do you and your spouse have? \$ 25.00 _____

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	Amount your spouse has
Checking	\$12.00	
Savings	\$1,5000	

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

- | | |
|--|--|
| <input checked="" type="checkbox"/> Home
Value \$370,000 | <input type="checkbox"/> Other real estate N/A
Value _____ |
| <input checked="" type="checkbox"/> Motor Vehicle #1
Year, make & model 2003 GX470
Value \$4,000 | <input type="checkbox"/> Motor Vehicle #2 N/A
Year, make & model _____
Value _____ |
| <input type="checkbox"/> Other assets
Description Value N/A | |

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

Person owing you or spouse money	Amount owed to you	Amount owed to your spouse
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

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)	\$ 1,500	\$ N/A
Are real estate taxes included? Yes	No	
Is property insurance included? Yes	No	
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 300.00	\$
Home maintenance (repairs and upkeep)	\$0	\$
Food	\$200	\$
Clothing	\$0	\$
Laundry and dry-cleaning	\$0	\$
Medical and dental expenses	\$30.00	\$
	You	Your spouse

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

Person owing you or spouse money	Amount owed to you	Amount owed to your spouse
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

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 Category	You	Your spouse
Medical and dental expenses	\$200.00	N/A
Laundry and dry cleaning	\$0	\$0
Clothing	\$0	\$0
Food	\$200	\$0
Home maintenance (repairs and upkeep)	\$0	\$0
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$200.00	\$0
Is property insurance included? Yes/No	No	No
Are real estate taxes included? Yes/No	No	No
Rent or home-mortgage payment (include lot rented for mobile home)	\$1,200	N/A

Transportation (not including motor vehicle payments)	\$20.00	\$
Recreation, entertainment, newspapers, magazines, etc.	\$0	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$
Life	\$ 0	\$
Health	\$ 0	\$
Motor Vehicle	\$70.00	\$
Other: _____	\$ 0	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0	\$
Installment payments		
Motor Vehicle	\$0 <i>Paid off</i>	\$
Credit card(s)	\$0	\$
Department store(s)	\$0	\$
Other: _____	\$0	\$
Alimony, maintenance, and support paid to others	\$0	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$0	\$
Other (specify): _____	\$0	\$
Total monthly expenses:	\$ 2,120.00	\$ _____
	_____	_____

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? 0

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. Since my traumatic injuries on June 6, 2014, I have not been able to work full-time. I had multiple fractures on my leg/ankle/foot (cast for over 4 months), also injured my knee, hip and both wrist (needing surgery for wrist). Several nerve damages on foot/legs/ankles along with chronic pain, which brought on the depression, anxiety and agoraphobia in which I don't leave my home often 8+ days straight. Prior to injuries, I had 3 jobs and extremely active in the community.

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

Executed on: October 29, 2019

Adrenie Mollad
(Signature)