Case	No.				
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IN THE

SUPREME COURT OF THE UNITED STATES OF AMERICA IN RE ROSALIND HOLMES,

Petition	er
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EMERGENCY MOTION FOR LEAVE TO FILE PETITION FOR MANDAMUS IN EXCESS OF THE 40-PAGE LIMIT

Now comes Petitioner, Rosalind Holmes, as a pro-se litigant pursuant to Rule 33 respectfully requesting the Court to grant her request to file the Emergency Writ of Mandamus in Excess of the 40-page limitation.

Background

For good cause, the Court or a Justice may grant leave to file a document in excess of the word limits, but application for such leave is not favored. An application to exceed word limits shall comply with Rule 22 and must be received by the Clerk at least 15 days before the fling date of the document in question, except in the most extraordinary circumstances. This petition presents an unprecedented thirteen-year campaign of conspiracy and corruption against petitioner involving the Cincinnati Division of the F.B.I., Macy's Inc., Dinsmore & Shohl LLP., City of Cincinnati, Freking, Myers, Reul LLC., Elizabeth Tuck, Ohio Disciplinary Counsel and Ohio Board of Professional Conduct and many others who are the defendants or parties of interest in this petition. As a result, petitioner cannot discuss each judgment in a separate petition to the Court because the judgments include similar defendants, interested parties, legal issues and facts which were decided simultaneously by the judges involved in the proceedings. In fact, the adverse judgments included in this petition are indicative of the underlying conflicts of interest, appearance of impropriety and clear abuse of discretion involving the judges, interested parties and defendants who are the the Cincinnati Division of the F.B.I., Macy's Inc., Dinsmore & Shohl LLP., City of Cincinnati, Freking, Myers, Reul LLC., Elizabeth Tuck, Ohio Disciplinary Counsel and Ohio Board of Professional Conduct, attorneys, government officials and politicians which require immediate disqualification of the judges. These are the extraordinary circumstances precipitating petitioners' request for this Court to grant her application to file the emergency writ of mandamus in excess of the 40-page limitation.

This emergency application for a writ of mandamus includes Parts I-VI, including 36 judgments, (pages 1-204), decided by

several judges simultaneously, in the Butler County Area III Court, Ohio's Twelfth District Court of Appeals. the Ohio Supreme

Court, U.S. District Court for the Southern Division of Ohio and the U.S. Sixth Circuit Court of Appeals on similar legal issues

or facts. All 36 judgments clearly and unambiguously demonstrate an abuse of discretion, overwhelming conflicts of interest

and appearance of impropriety by the judges and defendants involved in the proceedings. The factual background, Appendix

KK, (pages 205-247) provides a detailed explanation of approximately twenty years of conspiracy and corruption against

petitioner involving the the Cincinnati Division of the F.B.I., Macy's Inc., Dinsmore & Shohl LLP., City of Cincinnati, Freking,

Myers, Reul LLC., Elizabeth Tuck, Ohio Disciplinary Counsel and Ohio Board of Professional Conduct, and many others. The

other relevant and supporting documents Exhibits 1-10 (pages 248-320) and A-P, (pages 321-425), are included in support of

the emergency petition for a writ of mandamus.

Conclusion

For the foregoing reasons, Petitioner respectfully requests that the Court grant her request to file the Emergency Writ of

Mandamus in Excess of the 40-page limitation.

Respectfully submitted,

Rosalind R. Holmes

6673 Boxwood Lane Apt. C

Liberty Township, Ohio 45044

Rosalind Holmes

(513) 306-8837 (phone)

Initial Submission May 15, 2024

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No
IN THE
SUPREME COURT OF THE UNITED STATES
Rosalind Holmes — PETITIONER (Your Name)
VS.
USA 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 <i>in forma pauperis</i> .
Please check the appropriate boxes:
☐ Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):
United States District Court for the Southern District of Ohio, United States Sixth Circuit
Ohio's 12th District Court of Appeals, Butler County Area III Court.
☐ Petitioner has not previously been granted leave to proceed <i>in forma</i> 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
\Box a copy of the order of appointment is appended.
Rosalind Holmes
(Signature)

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

I, Rosalind Holmes, 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.

	age monthly amo past 12 months	ount during	Amount expe	ected
	You	Spouse	You	Spouse
Employment	\$0.00	\$0.00	\$_0.00	\$_0.00
Self-employment	\$_0.00	\$_0.00	\$0.00	\$_0.00
Income from real property (such as rental income)	\$_0.00	\$0.00	\$ 0.00	\$0.00
Interest and dividends	\$0.00	\$0.00	\$_0.00	\$0.00
Gifts	\$1,500	\$0.00	\$_0.00	\$0.00
Alimony	\$_0.00	\$0.00	\$ 0.00	\$0.00
Child Support	\$0.00	\$0.00	\$_0.00	\$0.00
Retirement (such as social security, pensions, annuities, insurance)	\$_0.00	\$ 0.00	\$_0.00	\$_0.00
Disability (such as social security, insurance payment	\$ 0.00	\$0.00	\$0.00	\$0.00
Unemployment payments	\$0.00	\$_0.00	\$ 0.00	\$_0.00
Public-assistance (such as welfare)	\$0.00	\$0.00	\$0.00	\$0.00
Other (specify):	\$0.00	\$0.00	\$0.00	\$0.00
Total monthly income	e: \$ <u>1,500</u>	\$0.00	\$0.00	\$0.00

Employer Huffy Corporation Vernovis	Address Miamisburg, Ohio Mason, Ohio	Dates of Employment 02/27/2023-03/24/2023 11/15/2022-02/24/2023	\$ 7500 \$ 7000 \$
3. List your spous (Gross monthly	se's employment history pay is before taxes or o	y for the past two years ther deductions.)	, most recent employer
Employer Not Applicable	Address	Dates of Employment	Gross monthly pay
			\$ \$
4. How much cash			
Below, state an institution.		pouse have in bank accou	unts or in any other fina
institution. Type of account (e.		pouse have in bank accou	Amount your spouse h
institution. Type of account (e. JS Bank	y money you or your sp.g., checking or savings)	Amount you have \$70.00	
institution. Type of account (e. JS Bank	y money you or your s	Amount you have \$ 70.00 \$\$	Amount your spouse h \$ N/A
institution. Type of account (e. US Bank 5. List the assets,	y money you or your s	Amount you have \$70.00	Amount your spouse h \$N/A \$ \$
institution. Type of account (e. US Bank 5. List the assets,	y money you or your sp.g., checking or savings) and their values, which	Amount you have \$ 70.00 \$\$	Amount your spouse h \$ N/A \$ \$ \$ e owns. Do not list clot
institution. Type of account (e. US Bank 5. List the assets, and ordinary ho	y money you or your sp.g., checking or savings) and their values, which	Amount you have \$ 70.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount your spouse h \$ N/A \$ \$ \$ e owns. Do not list clot
institution. Type of account (e. US Bank 5. List the assets, and ordinary ho Home Value 0.00	g., checking or savings) and their values, which usehold furnishings.	Amount you have \$ 70.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount your spouse h \$ N/A \$ \$ e owns. Do not list clot
institution. Type of account (e. US Bank 5. List the assets, and ordinary ho Home Value 0.00	g., checking or savings) and their values, which usehold furnishings.	Amount you have \$ 70.00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Amount your spouse h \$ N/A \$ \$ e owns. Do not list clot te #2 nodel
institution. Type of account (e. US Bank 5. List the assets, and ordinary ho Home Value 0.00 Motor Vehicle # Year, make & m Value	g., checking or savings) and their values, which usehold furnishings.	Amount you have \$	Amount your spouse h \$ N/A \$ \$ e owns. Do not list clot te #2 nodel

6. State every person, bus amount owed.	siness, or organization	owing you or yo	our spouse money, and the
Person owing you or your spouse money	Amount owed to	you Amo	ount owed to your spouse
<u></u>	\$	\$	
	\$	\$	
	\$	\$	
7. State the persons who re instead of names (e.g. "J.	ly on you or your spous S." instead of "John Sn	se for support. Fonith").	r minor children, list initials
Name	Relationsh	ip 	Age
8. Estimate the average morpaid by your spouse. A annually to show the mor	ldjust any payments th	nd your family. S	how separately the amounts
		You	Your spouse
Rent or home-mortgage pay (include lot rented for mobi Are real estate taxes inclu Is property insurance inclu	le home) ded? □ Yes □ No	<u>\$</u> 700	\$
Utilities (electricity, heating water, sewer, and telephone		\$	\$
Home maintenance (repairs	and upkeep)	\$	\$
Food		<u>\$</u> 200	\$
Clothing		<u>\$ 100</u>	\$
Laundry and dry-cleaning		<u>\$</u> 150	\$
Medical and dental expenses	5	\$	\$

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 100	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mort	gage payments)	
Homeowner's or renter's	\$. \$
Life	\$	\$
Health	\$	\$
Motor Vehicle	\$ 225.00	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage	e payments)	
(specify):	\$	\$
Installment payments		
Motor Vehicle	\$600.00	. \$
Credit card(s)	\$400.00	. \$
Department store(s)	\$	\$
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$0.00	. \$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses:	<u>\$ 1850.00</u>	\$

υ.			next 12 months?	ntilly income or expenses or in your assets or
	□Yes	No	If yes, describe on an	attached sheet.
10.	Have you pa	aid – or wi se, includi	ill you be paying – an at ng the completion of thi	torney any money for services in connection s form? Yes No
	If yes, how	much?		-
	If yes, state	the attorn	ney's name, address, and	l telephone number:
11.	Have you pa a typist) any form?	aid—or wil y money fo	l you be paying—anyon or services in connection	e other than an attorney (such as a paralegal or with this case, including the completion of this
	☐ Yes	XNo		
If y	res, state the	person's i	name, address, and telep	phone number:
			_	
12.	Provide any	other info	rmation that will help ex	xplain why you cannot pay the costs of this case.
	have purpose	ly destroye	n litigation in the matter of ed my life and caused me are employment.	Holmes v USA et. al., 1:20-CV-00825 and the defendate to be in financial ruin by having me terminated off ever
1 de	eclare under	penalty of	perjury that the forego	
Exe	ecuted on: M	ay 15,		20_2024
				Rosalind Holmes
				(Signature)

No
IN THE
SUPREME COURT OF THE UNITED STATES
Rosalind Holmes — PETITIONER (Your Name)
VS.
Judge C. Caperella-Kraemer, 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 <i>in forma pauperis</i> .
Please check the appropriate boxes:
Petitioner has previously been granted leave to proceed in forma pauperis in the following court(s):
United States District Court for the Southern Division of Ohio, United States Sixth Circuit
Ohio 12th Distrcit Court of Appeals, Butler County Area III Court
☐ Petitioner has not previously been granted leave to proceed <i>in forma</i> 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
\square a copy of the order of appointment is appended.
a as a size

Rosalind HolmpacceiveD
(Signature)
MAY 2 0 2024

SUPREME COURT, U.S.

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

	I, Rosalind Holmes	, 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 1	unable to pay
the	costs of this case or to give	security therefor; and I believe I am entitled to red	ress.

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.

	rage monthly amo past 12 months	ount during	Amount expense next month	ected
	You	Spouse	You	Spouse
Employment	\$_0.00	\$0.00	\$_0.00	\$_0.00
Self-employment	\$_0.00	\$0.00	\$_0.00	\$_0.00
Income from real property (such as rental income)	\$_0.00	\$0.00	\$0.00	\$0.00
Interest and dividends	\$0.00	\$0.00	\$0.00	\$_0.00
Gifts	\$_1,500	\$0.00	\$0.00	\$ <u>0.00</u>
Alimony	\$0.00	\$0.00	\$0.00	\$ <u>0.00</u>
Child Support	\$0.00	\$0.00	\$0.00	\$ <u>0.00</u>
Retirement (such as social security, pensions, annuities, insurance)	\$0.00	\$0.00	\$0.00	\$ 0.00
Disability (such as social security, insurance paymen	\$ <u>0.00</u>	\$0.00	\$0.00	\$_0.00
Unemployment payments	\$_0.00	\$0.00	\$_0.00	\$ <u>0.00</u>
Public-assistance (such as welfare)	\$0.00	\$0.00	\$_0.00	\$0.00
Other (specify):	\$0.00	\$0.00	\$0.00	\$0.00
Total monthly incom	e : \$1,500	\$ 0.00	\$ 0.00	\$ 0.00

Employer Huffy Corporation	Address	Dates of Employment	Gross monthly pay
Huffy Corporation Vernovis	Miamisburg, Ohio Mason, Ohio	02/27/2023-03/24/2023	\$ 7500 \$ 7000
Volitiovio	Wadon, Onio	11/10/2022 06/21/2020	\$
	Address	Dates of Employment	Gross monthly pay
			\$
- , , ,			
US Bank	, checking or savings)	\$ 70.00 \$	Amount your spouse h \$ ^{N/A}
US Bank		\$ 70.00	\$ N/A
US Bank	nd their values, which	\$ 70.00 \$	\$ N/A \$ \$ s \$ owns. Do not list clot
5. List the assets, as and ordinary hous Home Value 0.00	nd their values, which ehold furnishings.	\$ 70.00 \$ \$\$ \$ you own or your spouse Other real estat Value 0.00 Motor Vehicle #	\$ N/A \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

6. State every person, bus amount owed.	siness, or organization	n owing you or you	our spouse money, and the	
Person owing you or your spouse money	Amount owed to	you Amo	ount owed to your spouse	
	\$	\$		
1	\$	\$		
	\$	\$		
7. State the persons who re instead of names (e.g. "J.			or minor children, list initials	
Name	Relationsl	nip	Age	
	djust any payments t		Show separately the amounts kly, biweekly, quarterly, or	
		You	Your spouse	
Rent or home-mortgage pay (include lot rented for mobi Are real estate taxes inclu Is property insurance inclu	le home) ded? Yes No	<u>\$</u> 700	\$	
Utilities (electricity, heating water, sewer, and telephone		\$	\$	
Home maintenance (repairs	and upkeep)	\$	\$	
Food		<u>\$</u> 200	\$	
Clothing		<u>\$</u> 100	\$	
Laundry and dry-cleaning		<u>\$_150</u>	\$	
Medical and dental expenses		\$	\$	

	You	Your spouse
Transportation (not including motor vehicle payments)	<u>\$_100</u>	\$
Recreation, entertainment, newspapers, magazines, etc.	\$	\$
Insurance (not deducted from wages or included in mortg	age payments)	
Homeowner's or renter's	\$	\$
Life	\$	\$
Health	\$	\$
Motor Vehicle	<u>\$</u> 225.00	\$
Other:	\$	\$
Taxes (not deducted from wages or included in mortgage	payments)	
(specify):	\$	\$
Installment payments		
Motor Vehicle	\$ <u>600.00</u>	\$
Credit card(s)	<u>\$400.00</u>	\$
Department store(s)	\$	\$
Other:	\$	\$
Alimony, maintenance, and support paid to others	\$0.00	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses:	\$ 1850.00	\$

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
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 y	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 currently involved in litigation in the matter of Holmes v USA et. al., 1:20-CV-00825 and the defendance.
	have purposely destroyed my life and caused me to be in financial ruin by having me terminated off ever blacklisting me from future employment.
Ιd	eclare under penalty of perjury that the foregoing is true and correct.
Exe	ecuted on: May 15, , 20_2024
	Rosalind Holmes
	(Signature)