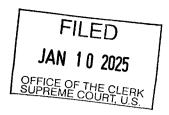
24-6804

No. _____



IN THE

SUPREME COURT OF THE UNITED STATES

LAWRENCE White __ PETITIONER (Your Name)

VS.

OFFice of Personnel Management - 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*.

(Signature)

XII. Statement of the Case

Provide a **concise** statement of the case containing the facts material to the consideration of the question(s) presented; you should summarize the relevant facts of the case and the proceedings that took place in the lower courts. You may need to attach additional pages, but the statement should be concise and limited to the relevant facts of the case.

XIII. Reasons for Granting the Petition

The purpose of this section of the petition is to explain to the Court why it should grant certiorari. It is important to read Rule 10 and address what compelling reasons exist for the exercise of the Court's discretionary jurisdiction. Try to show not only why the decision of the lower court may be erroneous, but the national importance of having the Supreme Court decide the question involved. It is important to show whether the decision of the court that decided your case is in conflict with the decisions of another appellate court; the importance of the case not only to you but to others similarly situated; and the ways the decision of the lower court in your case was erroneous. You will need to attach additional pages, but the reasons should be as concise as possible, consistent with the purpose of this section of the petition.

XIV. Conclusion

Enter your name and the date that you submit the petition.

XV. Proof of Service

You must serve a copy of your petition on counsel for respondent(s) as required by Rule 29. If you serve the petition by first-class mail or by third-party commercial carrier, you may use the enclosed proof of service form. If the United States or any department, office, agency, officer, or employee thereof is a party, you must serve the Solicitor General of the United States, Room 5614, Department of Justice, 950 Pennsylvania Ave., N.W., Washington, D. C. 20530–0001. The lower courts that ruled on your case are not parties and need not be served with a copy of the petition. The proof of service may be in the form of a declaration pursuant to 28 U. S. C. § 1746.

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

I, LAURence White, 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 amount during the past 12 months		Amount expected next month	
•	You	Spouse	You	Spouse
Employment	\$ NA	\$	\$	\$
Self-employment	\$ NA	\$	\$	\$
Income from real property (such as rental income)	\$_NA	\$	\$	\$
Interest and dividends	\$ NA	\$	\$	\$
Gifts	\$_MA	\$	\$.\$
Alimony	\$_ <i>\\A</i>	\$	\$	\$
Child Support	\$_ <u>NA</u>	\$	\$, \$
Retirement (such as social security, pensions, annuities, insurance)	2319 \$2321	\$	\$	\$
Disability (such as social security, insurance payments)	\$_ /\ A	\$	\$	\$
Unemployment payments	\$ <u>NA</u>	\$	\$	\$
Public-assistance (such as welfare)	\$ NH	\$	\$	\$
Other (specify):	\$	\$	\$	\$
Total monthly income:	\$ <u>4640</u>	\$	\$	\$

is before taxes			
Employer	Address	Dates of Employment	Gross monthly pay
NH			_ \$
			r r
			_ \$
	se's employment history pay is before taxes or o		s, most recent employer fire
Employer <i>W</i> A	Address	Dates of Employment	Gross monthly pay
			\$
			\$
4 How much and	do you and your enough	have? \$ /00	ounts or in any other finance
	• •		t in and ather from
institution.	a checking or savings	Amount you have	Amount your spouse has
institution.	a checking or savings	Amount you have	Amount your spouse has
institution.	a checking or savings		Amount your spouse has
institution. Type of account (e Navy Avareu Apple 5. List the assets	.g., checking or savings	Amount you have \$ //2.38 \$ //.44 \$ 235.97	Amount your spouse has
institution. Type of account (e Avareu Apple 5. List the assets, and ordinary ho	g., checking or savings. ک عرب and their values, whic	Amount you have \$ //2.38 \$ //.44 \$ 235.97	Amount your spouse has \$ \$ \$ \$ se owns. Do not list clothic
institution. Type of account (e Avareu Apple 5. List the assets, and ordinary ho	.g., checking or savings	Amount you have \$ 1/2.38 \$ 1/.44 \$ 235.97 h you own or your spou	Amount your spouse has \$ \$ \$ se owns. Do not list clothicate
institution. Type of account (e Navy Avareu Itpple 5. List the assets and ordinary ho Walue Walue Motor Vehicle # Year, make & n	and their values, which was the second furnishings.	Amount you have \$ 1/2.38 \$ 1/. 44 \$ 235.97 h you own or your spou Other real est Value Motor Vehicle	Amount your spouse has \$ \$ \$ se owns. Do not list clothicate
institution. Type of account (e Avareu Tpple 5. List the assets, and ordinary ho Home Value	and their values, which was the second furnishings.	Amount you have \$ 1/2.38 \$ 1/. 44 \$ 235.97 h you own or your spou Other real est Value Motor Vehicle	Amount your spouse has \$ \$ \$ se owns. Do not list clothicate #2 model
institution. Type of account (e Navy Avareu Itpple 5. List the assets and ordinary ho Walue Motor Vehicle # Year, make & n	and their values, which was the second furnishings.	Amount you have \$ //2.38 \$ //. 44 \$.235.97 h you own or your spou Other real est Value Motor Vehicle Year, make &	Amount your spouse has \$ \$ \$ se owns. Do not list clothicate #2 model
institution. Type of account (e Navy Avareu Itpple 5. List the assets and ordinary ho Walue Walue Motor Vehicle # Year, make & n Value Other assets	and their values, which was the second furnishings.	Amount you have \$ 1/2.38 \$ 1/. 44 \$ 235.97 h you own or your spou Other real est Value Motor Vehicle Year, make & Value	Amount your spouse has \$ \$ \$ se owns. Do not list clothicate #2 model

6. State every person, bus amount owed.	iness, or organizatio	n owing you or yo	ur spouse money, and the
Person owing you or your spouse money	Amount owed to	o you	unt owed to your spouse
	\$	\$	
	\$	\$	
7. State the persons who rel instead of names (e.g. "J.	y on you or your spot S." instead of "John S	use for support. For	r minor children, list initials
Name V A	Relations	•	Age
8. Estimate the average mon paid by your spouse. A annually to show the mon	djust any payments		how separately the amounts kly, biweekly, quarterly, or
Rent or home-mortgage pay (include lot rented for mobil Are real estate taxes included Is property insurance included	e home) ded? □Yes 幫No	_{\$} 1338°	\$
Utilities (electricity, heating water, sewer, and telephone		s 127.°°	\$
Home maintenance (repairs	and upkeep)	\$	\$
Food		\$ 200°°	
Clothing		\$	\$
Laundry and dry-cleaning		\$ 36°°	\$
Medical and dental expenses		\$ 2500 Dental Bill	\$

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 180	\$
Recreation, entertainment, newspapers, magazines, etc.	<u>\$ 45</u>	\$
Insurance (not deducted from wages or included in mort	tgage payments)	
Homeowner's or renter's	<u>\$ 11.62</u>	\$
Life	\$ 13,500 P	\$
Health	<u>\$ 387.80</u>	\$
Motor Vehicle	\$ 143.12	\$
Other: Charitable	\$ <i>575</i>	\$
Taxes (not deducted from wages or included in mortgage	e payments)	
(specify):	\$	\$
Installment payments		
Motor Vehicle	s 242	\$
Credit card(s)	\$ 3/3	\$
Department store(s)	\$	\$
Other:	\$ <u>·</u>	\$
Alimony, maintenance, and support paid to others	\$	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	\$
Other (specify):	\$	\$
Total monthly expenses: does ivotinclude rent Utilities Ect:	<u>\$ 1897.59</u>	\$

9. Do you expect any major changes to your monthly income or expens liabilities during the next 12 months?	ses or in your assets or
☐ Yes ☑ No If yes, describe on an attached sheet.	
10. Have you paid – or will you be paying – an attorney any money for with this case, including the completion of this form? ☐ Yes ☐ Yes	
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 attorned a typist) any money for services in connection with this case, including form?	y (such as a paralegal or ng the completion of this
☐ 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 p	pay the costs of this case.
I cannot agree with that more than \$16000 credit and debt	
I could not Afford AN Attorney	
This is the bestway for me Jan. 28 - A Dental Bill more than 2,500	
I declare under penalty of perjury that the foregoing is true and correct	
Executed on: JANUARY 10, 20 25	
Zanne	White
	ignature)