

No. \_\_\_\_\_

IN THE  
SUPREME COURT OF THE UNITED STATES

Curtis J Neeley Jr. MFA  
a *pro se* petitioner

PETITIONER

VS.

NAMEMEDIA INC.

Google Inc.

RESPONDENT(S)

Network Solutions LLC

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):

\_\_\_\_\_  
United States Court for the Western District of Arkansas

\_\_\_\_\_  
United States Court Eighth Circuit Court of Appeals

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

I, **Curtis J Neeley Jr.**, 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<br>the past 12 months | Amount expected<br>next month |
|----------------------------------------------------------------------------|-----------------------------------------------------|-------------------------------|
| Employment                                                                 | \$ 0                                                | \$ 0                          |
| Self-employment                                                            | \$ 0                                                | \$ 0                          |
| Income from real property<br>(such as rental income)                       | \$ 0                                                | \$ 0                          |
| Interest and dividends                                                     | \$ 0                                                | \$ 0                          |
| Gifts                                                                      | \$ 0                                                | \$ 0                          |
| Alimony                                                                    | \$ 100                                              | \$ 100                        |
| Child Support                                                              | \$ 0                                                | \$ 0                          |
| Retirement (such as social<br>security, pensions,<br>annuities, insurance) | \$ 0                                                | \$ 0                          |
| Disability (such as social<br>security, insurance payments)                | \$ 950                                              | \$ 950                        |
| Unemployment payments                                                      | \$ 0                                                | \$ 0                          |
| Public-assistance<br>(such as welfare)                                     | \$ 70.                                              | \$ 70.                        |
| Other (specify): _____                                                     | \$ 0                                                | \$ 0                          |
| <br>Total monthly income :                                                 | <br>\$ 1120                                         | <br>1120                      |

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 |
|----------|---------|---------------------|-------------------|
|----------|---------|---------------------|-------------------|

100% disabled since Sept 2, 2002

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 |
|----------|---------|---------------------|-------------------|
|----------|---------|---------------------|-------------------|

Divorced since 2008

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 |
|-----------------------|-----------------|-----------------|
| Simmons First         | checking        | -5 to +20.00    |

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

Motor Vehicle #1  
Year, make & model 91 Dodge Caravan  
Value \$10,000

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

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

I swear or affirm that no person or entity owes me any money and that I am single.

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

| Name | Relationship | Age |
|------|--------------|-----|
|------|--------------|-----|

Nobody relies on me for support because my three children receive disability income till they are eighteen even if I expire.

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.

Rent or home-mortgage payment  
(include lot rented for mobile home) \$ 530.00

Are real estate taxes included?  Yes  No

Is property insurance included?  Yes  No

Utilities (electricity, heating fuel,  
water, sewer, and telephone) \$ 140.00

Home maintenance (repairs and upkeep) \$ 45

Food \$ 125

Clothing \$ 20

Laundry and dry-cleaning \$ 30

Medical and dental expenses \$ 60

|                                                                                             |    | You       |
|---------------------------------------------------------------------------------------------|----|-----------|
| Transportation (not including motor vehicle payments)                                       | \$ | 40-60     |
| Recreation, entertainment, newspapers, magazines, etc.                                      | \$ | 50        |
| Insurance (not deducted from wages or included in mortgage payments)                        |    |           |
| Homeowner's or renter's                                                                     | \$ | 0         |
| Life                                                                                        | \$ | 0         |
| Health                                                                                      | \$ | 0         |
| Motor Vehicle                                                                               | \$ | 23        |
| Other: _____                                                                                | \$ | 0         |
| Taxes (not deducted from wages or included in mortgage payments)                            |    |           |
| (specify): _____                                                                            | \$ | 0         |
| Installment payments                                                                        |    |           |
| Motor Vehicle                                                                               | \$ | 0         |
| 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):    Internet Access and TV                                                  | \$ | 89        |
| Total monthly expenses:                                                                     | \$ | 1120-1230 |

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

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

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

12. Provide any other information that will help explain why you cannot pay the costs of this case.

I swear or affirm that I am able to live outside a nursing home due to receiving a Medicare waiver but that I marginally subsist with support and wheelchair repairs and the costs of medical supplies used in changing catheters or due to paralysis often exceed my income. Food Stamps and other public assistance is how I am marginally able to survive.

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

Executed on: \_\_\_\_\_, 20\_\_\_\_

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(Signature)