1	Case No
2	Dept. No.
3	
4	JAN, 2,8 2022 //
5	CLERIC OF SUPPEME COLOR
6	IN THE SUPREME COURT OF THE STATE OF NEVADAY DEPUTY CLERK
7	
8	
9	-101-1N NETT
10	Plaintiff/Petitioner, MOTION FOR LEAVE TO PROCEED
11	V. IN FORMA PAUPERIS
12	FIRST JUDILIAL DISTRICT COURT,
13	Defendant/Respondent. /
14	The Plaintff John Neff
15	in properia persona, and respectfully moves this Honorable Court
16	purauant to N.R.S. 12.015, for an order granting leave to
17	proceed in the above-entitled action in forma pauperis, without
18	requiring John Neft' to pay or provide security
19	for the payment of costs of prosecuting this action.
20	This motion is made based upon the attached affidavit of
21	John Neff.
22	Dated this 10th Day of January 2022
23	
24	RESPECTFULLY SUBALTTED,
25	Me
26	
27	
00	

22-02088

1				
2	John Nett , 54213			
8				
4	Carson City, Nv. 89702 Petitioner in Proper Person			
5				
6				
7				
8	The state of the s			
9	-18471V VETT Petitioner,			
10	Vs. Case No.:			
11	FIRST JUDICIAL DISTRICT COURT, Dept. No.:			
12				
13	AFFIDAVIT IN SUPPORT OF REQUEST TO PROCEED IN FORMA PAUPERIS			
14				
15	am Petitioner in the above-entitled case; that in support of my Motion to proceed without being			
16	required to prepay fees, costs or give security therefore; I state that because of my poverty I am			
17	unable to pay the costs of said proceeding or to give security therefore; that I am entitled to			
18	relief.			
19	I do X Do not request an attorney to be appointed for me.			
20	I further swear that the responses, which I have made to question, and instructions below are			
21	true.			
22	1. Are you presently employed: Yes X No			
23	A. If the answer is yes, state the amount of your salary of wages per month,			
24	and give name and address of your employer:			
25	to as a unit porter			
26	B. If the answer is no, state the date of last employment and the amount of			
27	salary and wages per month, which you received:			
- 28				
- 447	l			

2			
8	2. Have you received within the past twelve months my money from any of the		
4	following sources?		
	a. Business, profession or form of self-employment?	Yes No _X	
	b. Rent payments, interest or dividends?	Yes No _X	
0	e. Pensions, anmities or life insurance payments?	Yes No _X	
7	d. Gifts or inheritances ?	Yes X No	
8	e. Any other sources ?	Yes X No	
9			
10	amount received from each during the past twelve months:		
11	Maria Maria		
12	V /		
13			
14	If the answer is "YES" state the total value of the items owned: \$7550 (savings)		
15	4. Do you own any real estate, stocks, bonds, notes, automobiles, or other valuables		
16	property (excluding ordinary household furnishing and clothing)? Yes No _X		
17	If your answer is "YES: describe the property and state its approximate value:		
18			
19	List the persons who are dependent upon you for support, state;		
20	those persons, and indicate how much you contribute toward their support	:	
21	NA		
22	UNDER THE PENALTY OF PERJURY, Pursuant to NRS 208.	165 the above affidavit	
23	is true and correct to the best of my personal knowledge.		
24	DATED this 10th day of Juduary 20	122.	
25			
26	1/1		
77	Sign Your Name Here		
28	John Neff #3	4215	
_		DOC#	

FINANCIAL CERTIFICATE

I hereby certify that the Petitioner/Plaintiff John Neff				
has the sum of \$ 142.96 on account to his credit at th				
Northern Nevada Correctional Center where he is confined.				
I further certify that the Petitioner/Plaintiff likewise has the following				
securities to his credit according to the records of said				
institution: Soving has a balance of \$ 550.00				
•				
Dated this, 2021				

Custodian of Records
Inmate Accounting Services
Northern Nevada Correctional Center
P.O. Box 7000
Carson City, Nevada 89702

CERTIFICATE OF SERVICE BY MAIL

	certify that on this date I did serve a true and correct copy of the
foregoing document: 48 Motion	1 to Proceed in Farma Pauporis, upon the following:
Dated this 13th day of Janua	2/ 1, 20 22
	Nevada Supreme Ct
	701 5. Cangon
	AND
	First Judicial Destrict of.
	R76 & MUSSER Ste 3031
-	BY: MG
	John Neff
*	In Proper Person

AFFIRMATION PURSUANT TO NRS 239B.030

** I certify that that the foregoing document DOES	NOT contain the social security number of
any persons.	1/
1/13/22	
(Date)	/ (Signature)