

**SEVENTH (7TH) CIRCUIT COURT  
SECOND JUDICIAL DISTRICT  
OF HINDS COUNTY, MISSISSIPPI**

**BETTY L. SMITH (FORMERLY HEARN)  
PLAINTIFF**

**Civil Action(s): 24-22  
Refiling: 25CH2:15-cv-000016  
25CH2:15-cv-000101**

**vs.**

**HINDS COUNTY BOARD OF SUPERVISORS  
SUPERVISORS ROBERT GRAHAM, BOBBY MCGOWAN,  
AND DEBORAH BUTLER-DIXON; DION QUINN (PUBLIC WORKS);  
THELMA OWENS (PRIVATE ACTOR);  
AND JOHN/JANE DOE(S)  
DEFENDANTS**

**MOTION FOR DEFAULT JUDGMENT**

Comes now, Betty L. Smith (hereafter "Plaintiff"), *pro se*, pursuant to Rule 55(b) of the Mississippi Rules of Civil Procedure, requesting entry of a Default Judgment, including court ordered mediation conferences and/or hearings, if and as this Court deems necessary and proper, to carry its judgment into effect.

**I. Background**

1. September 19, 2024: Application to Clerk for Entry of Default and Supporting Affidavit filed
2. August 4, 2024: Summons served upon Ms. Thelma Owens
3. July 30, 2024; Summons served upon the Clerk of the Hinds County Board of Supervisors (HCBS) in and on behalf of the HCBS and Supervisors Robert Graham, Bobby McGowan, and Deborah Butler-Dixon, and Dion Quinn (Public Works)
4. July 9, 2024: Civil Case filing Form filed, by Plaintiff.
5. July 9, 2024: Complaint filed, by Plaintiff.

**II. Summary**

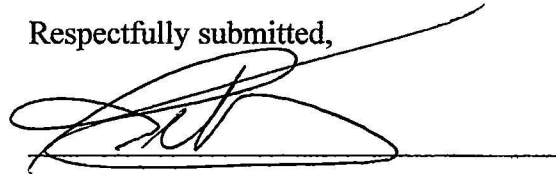
6. Plaintiff requests that this court:

- a. confirm title to Plaintiff, removal of Plaintiff's property from the Hinds County Road Inventory, and issue injunctions ejecting and prohibiting unauthorized trespasses.
- b. grant the \$2,000,000 compensatory and punitive damages stipulated by the Plaintiff or determine an equitable amount for the (1) continuing deprivation and ensuing effects upon her business property, (2) disenfranchisement of her right and ability to earn the intended income and further the generational wealth intended by Plaintiff's ancestors; (3) Plaintiff's pain and suffering. See Exhibit A.

### III. Certification

I certify that Plaintiff, on September 19, 2024, mailed a copy of this motion to The Honorable Robert Graham, President, Hinds County Board of Supervisors, 316 S. President Street, Jackson, MS 39201, Ms. Thelma Owens, 1072 Smith Drive, Raymond, MS 39154, and Mr. Kenneth R. Dreher, 111 Hillmont Circle, Clinton, MS 39056, Counsel to the Honorable Isla Tullos.

Respectfully submitted,



Betty L. Smith (formerly Hearn), *pro se*  
13014 N Dale Mabry Highway, 321  
Tampa, Florida 33618  
813-451-2337

Sworn to and subscribed before me this the 19 day of September, 2024.



ALYUNEYS CRESPO  
Notary Public  
State of Florida  
Comm# HH500284  
Expires 3/5/2028

  
\_\_\_\_\_  
Notary Public

(To be completed by Attorney/Party)

Case: 25-012-24-cv-00022-EEB

Document # 11

Filed: 09/26/2024

Page 3 of 3

Prior to Filing of Pleading)

County # Judicial Court ID

District (CH, CI, CO)

07 09 22

Month Date Year

This area to be completed by clerk

Exhibit "A"

Pg 193

Local Docket ID

Mississippi Supreme Court

Form AOC/01

Administrative Office of Courts

(Rev 2009)

In the

Court of

County

Case Number if filed prior to 1/1/94

Origin of Suit (Place an "X" in one box only)

☐ Initial Filing☐ Reinstated☐ Foreign Judgment Enrolled☐ Transfer from Other court☐ Other☐ Remanded☒ Reopened☐ Joining Suit/Action☐ Appeal

Plaintiff - Party(ies) Initially Bringing Suit Should Be Entered First - Enter Additional Plaintiffs on Separate Form

Individual

Smith

Last Name

Beth

First Name

Maiden Name, if applicable

M.I.

Jr/Sr/III/IV

Estate of

☒ Check (x) if Individual Plaintiff is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity:

D/B/A or Agency

Smith Apartments

Business

Smith Apartment

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated

☐ Check (x) if Business Plaintiff is filing suit in the name of an entity other than the above, and enter below:

D/B/A

Address of Plaintiff

13014 N. Dale Mabry Hwy, Tampa, FL 33618

Attorney (Name &amp; Address)

☒ Check (x) if Individual Filing Initial Pleading is NOT an attorney.

MS Bar No.

Signature of Individual Filing:

Defendant - Name of Defendant - Enter Additional Defendants on Separate Form

Individual

Hinds County Bd of Supervisors

Last Name

First Name

Maiden Name, if applicable

M.I.

Jr/Sr/III/IV

Estate of

☒ Check (x) if Individual Defendant is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity:

D/B/A or Agency

Hinds County Board of Supervisors

Business

Hinds County Board of Supervisors

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated

☐ Check (x) if Business Defendant is acting in the name of an entity other than the above, and enter below:

D/B/A

Attorney (Name &amp; Address) - If Known

MS Bar No.

Damages Sought:

Compensatory \$ 1,000,000

Punitive \$ 1,000,000

☐ Check (x) if child support is contemplated as an issue in this suit.

\*If checked, please submit completed Child Support Information Sheet with this Cover Sheet

Nature of Suit (Place an "X" in one box only)

Domestic Relations

- ☐
- Child Custody/Visitation
- 
- ☐
- Child Support
- 
- ☐
- Contempt
- 
- ☐
- Divorce: Fault
- 
- ☐
- Divorce: Irreconcilable Diff.
- 
- ☐
- Domestic Abuse
- 
- ☐
- Emancipation
- 
- ☐
- Modification
- 
- ☐
- Paternity
- 
- ☐
- Property Division
- 
- ☐
- Separate Maintenance
- 
- ☐
- Termination of Parental Rights
- 
- ☐
- UIFSA (eff 7/1/97; formerly URESA)
- 
- ☐
- Other

Appeals

- ☐
- Administrative Agency
- 
- ☐
- County Court
- 
- ☐
- Hardship Petition (Driver License)
- 
- ☐
- Justice Court
- 
- ☐
- MS Dept Employment Security
- 
- ☐
- Worker's Compensation
- 
- ☐
- Other

Business/Commercial

- ☐
- Accounting (Business)
- 
- ☐
- Business Dissolution
- 
- ☐
- Debt Collection
- 
- ☐
- Employment
- 
- ☐
- Foreign Judgment
- 
- ☐
- Garnishment
- 
- ☐
- Replevin
- 
- ☐
- Other

Probate

- ☐
- Accounting (Probate)
- 
- ☐
- Birth Certificate Correction
- 
- ☐
- Commitment
- 
- ☐
- Conservatorship
- 
- ☐
- Guardianship
- 
- ☐
- Heirship
- 
- ☐
- Intestate Estate
- 
- ☐
- Minor's Settlement
- 
- ☐
- Muniment of Title
- 
- ☐
- Name Change
- 
- ☐
- Testate Estate
- 
- ☐
- Will Contest
- 
- ☐
- Other

Children/Minors - Non-Domestic

- ☐
- Adoption - Contested
- 
- ☐
- Adoption - Uncontested
- 
- ☐
- Consent to Abortion Minor
- 
- ☐
- Removal of Minority
- 
- ☐
- Other

Civil Rights

- ☐
- Elections
- 
- ☐
- Expungement
- 
- ☐
- Habeas Corpus
- 
- ☐
- Post Conviction Relief/Prisoner
- 
- ☐
- Other

Contract

- ☐
- Breach of Contract
- 
- ☐
- Installment Contract
- 
- ☐
- Insurance
- 
- ☐
- Specific Performance
- 
- ☐
- Other

Statutes/Rules

- ☐
- Bond Validation
- 
- ☐
- Civil Forfeiture
- 
- ☐
- Declaratory Judgment
- 
- ☐
- Injunction or Restraining Order
- 
- ☐
- Other

Real Property

- ☐
- Adverse Possession
- 
- ☐
- Ejectment
- 
- ☐
- Eminent Domain
- 
- ☐
- Eviction
- 
- ☐
- Judicial Foreclosure
- 
- ☐
- Lien Assertion
- 
- ☐
- Partition
- 
- ☐
- Tax Sale: Confirm/Cancel
- 
- ☐
- Title Boundary or Easement
- 
- ☒
- Other Quiet Title

Torts

- ☐
- Bad Faith
- 
- ☐
- Fraud
- 
- ☐
- Loss of Consortium
- 
- ☐
- Malpractice - Legal
- 
- ☐
- Malpractice - Medical
- 
- ☐
- Mass Tort
- 
- ☐
- Negligence - General
- 
- ☐
- Negligence - Motor Vehicle
- 
- ☐
- Product Liability
- 
- ☐
- Subrogation
- 
- ☐
- Wrongful Death
- 
- ☐
- Other



Exhibit A pg 2 of 3

IN THE COUNTY COURT OF HINDS  
SECOND JUDICIAL DISTRICT, CITY OF Raymond  
COUNTY, MISSISSIPPI

Docket No. 24. 22  
File Yr Chronological No. Clerk's Local ID  
Docket No. If Filed  
Prior to 1/1/94

DEFENDANTS IN REFERENCED CAUSE - Page 1 of Defendants Pages  
IN ADDITION TO DEFENDANT SHOWN ON CIVIL CASE FILING FORM COVER SHEET

Defendant #2: Graham Robert  
Individual: Last Name First Name Maiden Name, if Applicable Middle Init. Jr/Sr/III/IV

Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of

Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A Hinds County Board of Supervisors

Business Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

Check (✓) if Business Defendant is being sued in the name of an entity other than the name above, and enter below:

D/B/A

ATTORNEY FOR THIS DEFENDANT: Bar # or Name: Pro Hac Vice (✓) Not an Attorney(✓)

Defendant #3: McGowan Bobby  
Individual: Last Name First Name Maiden Name, if Applicable Middle Init. Jr/Sr/III/IV

Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of

Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A Hinds County Board of Supervisors

Business Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

Check (✓) if Business Defendant is being sued in the name of an entity other than the name above, and enter below:

D/B/A

ATTORNEY FOR THIS DEFENDANT: Bar # or Name: Pro Hac Vice (✓) Not an Attorney(✓)

Defendant #4: Butler-Dixon Deborah  
Individual: Last Name First Name Maiden Name, if Applicable Middle Init. Jr/Sr/III/IV

Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of

Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A

Business Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

Check (✓) if Business Defendant is being sued in the name of an entity other than the above, and enter below:

D/B/A

ATTORNEY FOR THIS DEFENDANT: Bar # or Name: Pro Hac Vice (✓) Not an Attorney(✓)

IN THE COUNTY COURT OF HINDS COUNTY, MISSISSIPPI  
SECOND JUDICIAL DISTRICT, CITY OF Raymond

Exhibit A  
ps 3 of 3

Docket No. 24 22 Docket No. If Filed  
File Yr Chronological No. Clerk's Local ID Prior to 1/1/94

DEFENDANTS IN REFERENCED CAUSE - Page 1 of Defendants Pages  
IN ADDITION TO DEFENDANT SHOWN ON CIVIL CASE FILING FORM COVER SHEET

Defendant #2:

Individual: Quinn Dion (Maiden Name, if Applicable) Middle Init. Jr/Sr/III/IV  
Last Name First Name

Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of

✓ Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A

Hinds County Board of Supervisors, Public Works

Business

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

Check (✓) if Business Defendant is being sued in the name of an entity other than the name above, and enter below:

D/B/A

ATTORNEY FOR THIS DEFENDANT: Bar # or Name: Pro Hac Vice (✓) Not an Attorney(✓)

Defendant #3:

Individual: Dwens Thelma (Maiden Name, if Applicable) Middle Init. Jr/Sr/III/IV  
Last Name First Name

Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of

Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A

Business

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

Check (✓) if Business Defendant is being sued in the name of an entity other than the name above, and enter below:

D/B/A

ATTORNEY FOR THIS DEFENDANT: Bar # or Name: Pro Hac Vice (✓) Not an Attorney(✓)

Defendant #4:

Individual: (Maiden Name, if Applicable) Middle Init. Jr/Sr/III/IV  
Last Name First Name

Check (✓) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style:

Estate of

Check (✓) if Individual Defendant is acting in capacity as Business Owner/Operator (D/B/A) or State Agency, and enter that name below:

D/B/A

Business

Enter legal name of business, corporation, partnership, agency - If Corporation, indicate state where incorporated

Check (✓) if Business Defendant is being sued in the name of an entity other than the above, and enter below:

D/B/A

ATTORNEY FOR THIS DEFENDANT: Bar # or Name: Pro Hac Vice (✓) Not an Attorney(✓)