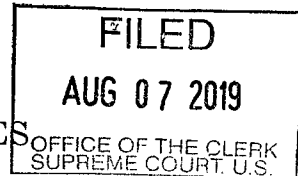


No. _____

19-5584

IN THE
SUPREME COURT OF THE UNITED STATES



CHRISTOPHER ISAAC SIMMONS PETITIONER
(Your Name)

VS.

R. GRISSOM, ET AL., RESPONDENT(S)

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

NOTE: UNDER IMMINENT DANGER OF SERIOUS PHYSICAL INJURY [see att.].

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*.

Please check the appropriate boxes:

☒ Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

U.S.D.C., EASTERN DIST. NO. 07-cv-01058

U.S. COURT OF APPEALS, NINTH CIRCUIT REVOKED UNDER 1915(g)

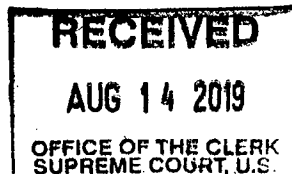
☐ Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

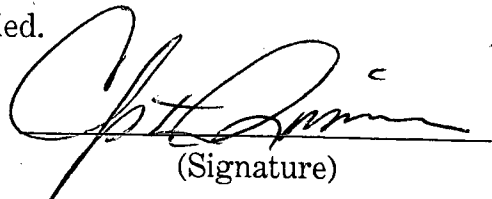
☒ Petitioner's affidavit or declaration in support of this motion is attached hereto.

☐ 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

☐ a copy of the order of appointment is appended.




(Signature)

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

I, CHRISTOPHER L. SIMMONS, 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.

INCARCERATED PAST 24 YEARS

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 the past 12 months		Amount expected next month	
	You ^{PRISON JOB} AT 28¢ HR.	Spouse	You	Spouse
Employment	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Self-employment	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Gifts	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Alimony	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Child Support	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Disability (such as social security, insurance payments)	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ <u>Ø</u>	\$ _____	\$ _____	\$ _____
Other (specify): <u>ART WORK</u>	^{OVERALL} \$ <u>10-75.00</u> ^{8-10.00}	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ <u>Ø</u>	\$ <u>Ø</u>	\$ <u>Ø</u>	\$ <u>Ø</u>

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
INCARCERATED 24 YEARS		NOV. 2017	\$
PRISON JOB		TO DATE	\$.08¢ PER HOUR X 20 HRS WK
			\$

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
GOULD ELECTRIC	N/A	1995	\$
N/A			\$
			\$

4. How much cash do you and your spouse have? \$ \$97.00 PACKAGE
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	Amount your spouse has
0	N/A	\$ N/A	\$ 0
0	N/A	\$ N/A	\$ 0
0	N/A	\$ N/A	\$ 0

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

☐ Home Value N/A

☐ Other real estate Value N/A

☐ Motor Vehicle #1 Year, make & model N/A Value _____

☐ Motor Vehicle #2 Year, make & model N/A Value _____

☐ Other assets Description TV - TYPEWRITER - ART SUPPLIES Value \$ 350.00

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
<u>Ø</u>	\$ <u>Ø</u>	\$ <u>Ø</u>
<u>Ø</u>	\$ <u>Ø</u>	\$ <u>Ø</u>
<u>Ø</u>	\$ <u>Ø</u>	\$ <u>Ø</u>

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

Name	Relationship	Age
<u>Ø</u>	<u>N/A</u>	<u>N/A</u>
<u>Ø</u>	<u>N/A</u>	<u>N/A</u>
<u>Ø</u>	<u>N/A</u>	<u>N/A</u>

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.

	You	DEVOURED 1989 Your spouse
INCARCERATED		
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>N/A</u>	\$ _____
Are real estate taxes included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>N/A</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ <u>N/A</u>	\$ _____
Food	\$ <u>N/A</u>	\$ _____
Clothing	\$ <u>N/A</u>	\$ _____
Laundry and dry-cleaning	\$ <u>N/A</u>	\$ _____
Medical and dental expenses	\$ <u>N/A</u>	\$ _____

LAST 24 YEARS INCARCERATED

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ <u>N/A</u>
Life	\$ <u>0</u>	\$ <u>N/A</u>
Health	\$ <u>0</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>0</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>0</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>0</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>0</u>	\$ <u>N/A</u>

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 If yes, describe on an attached sheet.

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? _____

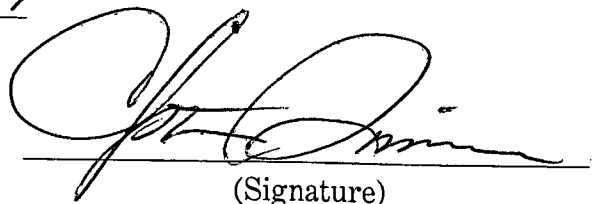
If yes, state the person's name, address, and telephone number:

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

INCARCERATED WITH 175 YEARS TO LIFE SENTENCE.
NO FAMILY OR OUTSIDE SUPPORT.

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

Executed on: AUGUST 1, 2019


(Signature)

UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT

FILED

JUL 24 2018

MOLLY C. DWYER, CLERK
U.S. COURT OF APPEALS

CHRISTOPHER ISAAC SIMMONS,

Plaintiff - Appellant,

v.

GRISSOM; et al.,

Defendants - Appellees.

No. 18-16357

D.C. No. 1:07-cv-01058-DAD-SAB

U.S. District Court for Eastern
California, Fresno

ORDER

A review of the district court docket reflects that appellant was permitted to proceed in forma pauperis in the district court, and that such permission has not been revoked to date. Consequently, appellant's forma pauperis status continues in this court. *See* Fed. R. App. P. 24(a). Pursuant to 28 U.S.C. § 1915(b)(1) and (2), however, appellant must pay the full amount of the filing and docketing fees for this appeal when funds are available in appellant's account. Appellant is not responsible for payment when the funds in appellant's prison trust account total less than \$10, but payments must resume when additional deposits are made or funds are otherwise available.