

Nevada Supreme Court No. 72805, 78907
District Court No. C-14-297388-1

19-6523

In The

Supreme Court of The United States
of America

Pascual A. McMurry Rivera - Petitioner

vs.

The State of Nevada - Respondent

Motion For Leave To Proceed In Forma Pauperis

FILED

JUL 31 2019

OFFICE OF THE CLERK
SUPREME COURT, U.S.

The petitioner asks leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed in forma pauperis. The petitioner has previously been granted leave to proceed in forma pauperis in the State of Nevada's Eighth Judicial District Court.

Dated this 12th day of September, 2019

Respectfully Submitted,

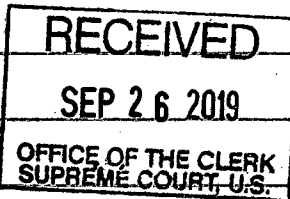
Pascual A. McMurry Rivera

High Desert State Prison

22010 Cold Creek Road

Indian Springs, NV 89070

(702) 879-6789



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Pascual A. McMurry Rivera
High Desert State Prison
22010 Cold Creek Road
Indian Springs, NV 89070
(702) 879-6789
September 16th, 2019

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

I, Pascual Andrus McHenry Ingram 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 the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify): <u>Inmate Trust Account</u>	\$ <u>40.00</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Total monthly income:	\$ <u>40.00</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

- | Employer | Address | Dates of Employment | Gross monthly pay |
|----------|---------|---------------------|-------------------|
| N/A | N/A | N/A | \$ N/A |

- | Employer | Address | Dates of Employment | Gross monthly pay |
|----------|---------|---------------------|-------------------|
| N/A | N/A | N/A | \$ N/A |

- | Type of account (e.g., checking or savings) | Amount you have | Amount your spouse has |
|---|-----------------|------------------------|
| Emergency Trust Account | \$ 0.04 | \$ |
| XXXXXXXXXXXXXXXXXXXX | \$ XXXXXXXX | \$ N/A |

- ☐ Home Value N/A
- ☐ Other real estate Value N/A

- ☐ Motor Vehicle #1
 Year, make & model N/A
 Value N/A
- ☐ Motor Vehicle #2
 Year, make & model N/A
 Value N/A

- | | | |
|-------------------------------------|--------------|--|
| <input checked="" type="checkbox"/> | Other assets | |
| | Description | GPX AM/FM Radio & ConAir Cordless Beard & Mustache Trimmer |
| | Value | \$22 ⁰⁰ & \$20 ⁰⁰ Total 42 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

N/A

Amount owed to you

\$ N/A

Amount owed to your spouse

\$ N/A

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

Name	Relationship	Age
<u>D.R.</u>	<u>Daughter</u>	<u>13</u>
<u>A.R.</u>	<u>Son</u>	<u>13</u>
<u>J.R.</u>	<u>Son</u>	<u>10</u>
<u>N.R.</u>	<u>Daughter</u>	<u>6</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	Your spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>0</u>	\$ <u>0</u>
Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>0</u>	\$ <u>0</u>
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ <u>0</u>
Food	\$ <u>60.00</u>	\$ <u>0</u>
Clothing	\$ <u>0</u>	\$ <u>0</u>
Laundry and dry-cleaning	\$ <u>0</u>	\$ <u>0</u>
Medical and dental expenses	\$ <u>0</u>	\$ <u>0</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>Ø</u>	\$ <u>Ø</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>Ø</u>	\$ <u>Ø</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>Ø</u>	\$ <u>Ø</u>
Life	\$ <u>Ø</u>	\$ <u>Ø</u>
Health	\$ <u>Ø</u>	\$ <u>Ø</u>
Motor Vehicle	\$ <u>Ø</u>	\$ <u>Ø</u>
Other: _____	\$ <u>Ø</u>	\$ <u>Ø</u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>Ø</u>	\$ <u>Ø</u>
Installment payments		
Motor Vehicle	\$ <u>Ø</u>	\$ <u>Ø</u>
Credit card(s)	\$ <u>Ø</u>	\$ <u>Ø</u>
Department store(s)	\$ <u>Ø</u>	\$ <u>Ø</u>
Other: _____	\$ <u>Ø</u>	\$ <u>Ø</u>
Alimony, maintenance, and support paid to others	\$ <u>1,200²⁴</u>	\$ <u>Ø</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>Ø</u>	\$ <u>Ø</u>
Other (specify): _____	\$ <u>Ø</u>	\$ <u>Ø</u>
Total monthly expenses:	\$ <u>1,200²⁴</u>	\$ <u>Ø</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? _____

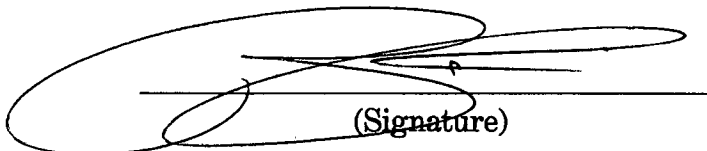
If yes, state the person's name, address, and telephone number:

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

I'm incarcerated at High Desert State Prison, housed in Administrative Segregation and do not have employment.

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

Executed on: *October 11, 2019*


(Signature)