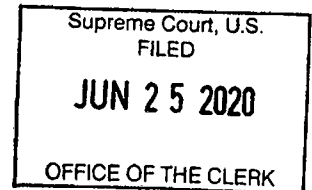


No. **20-5608**

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

Michael J. Besoyan — PETITIONER
(Your Name)



VS.

Sacramento County, et al. — RESPONDENT(S)
per first amended complaint dated 12-20-2017

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*.

Please check the appropriate boxes:

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

Eastern District for California United States District Court 2:16-cv-00046

Ninth Circuit Court of Appeals 19-16598

☐ 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:

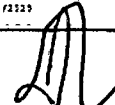
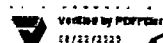
☐ The appointment was made under the following provision of law: _____
_____, or

☐ a copy of the order of appointment is appended.

Dated: 08-21-2020

Michael J. Besoyan

(Signature)



APPENDIX A

UNITED STATES COURT OF APPEALS
FOR THE NINTH DISTRICT

Michael J. Besoyan
No. 19-16598

Plaintiff-Appellant

Motion for Reconsideration from Dispositive Order

1. For 3 years- 10 months this case has not received consideration for the numerous Constitutional violations and deprivations that I have endured caused by the willful malfeasance and misconduct of the defendants.
2. Service of process did not occur after over 3.5 years in the District court judicial system.

Rule 4 (c)(3) FRCP.

"By a Marshal... the court may order that service be made by a United States marshal or deputy marshal... The court must so order if the plaintiff is authorized to proceed in forma pauperis under 28 U.S.C. §1915"

The District court closed the case without consideration for the duly stated elements of the claims, without service of process to the defendants listed in the first amended complaint which denies me of constitutionally protected rights and privileges of due process and equal protection under the 14th amendment.

APPENDIX A

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OFFICE OF THE CLERK
SUPREME COURT, U.S.

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
none			\$
			\$
			\$

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
no spouse			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ 0
Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
	\$ 0	\$
	\$	\$
	\$	\$

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

<input type="checkbox"/> Home Value _____	<input type="checkbox"/> Other real estate Value _____
<input checked="" type="checkbox"/> Motor Vehicle #1 Year, make & model <u>91 jeep wrangler</u> Value <u>400.00</u>	<input type="checkbox"/> Motor Vehicle #2 Year, make & model _____ Value _____
<input checked="" type="checkbox"/> Other assets Description <u>former trade tools</u> Value <u>300.00</u>	

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>none</u>	\$ <u> </u>	\$ <u> </u>
<u> </u>	\$ <u> </u>	\$ <u> </u>
<u> </u>	\$ <u> </u>	\$ <u> </u>

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>RB</u>	<u>grand daughter</u>	<u>15</u>
<u> </u>	<u>born with Down Syndrome</u>	<u> </u>
<u> </u>	<u> </u>	<u> </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>1200</u>	\$ <u> </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>600</u>	\$ <u> </u>
Home maintenance (repairs and upkeep)	\$ <u>130</u>	\$ <u> </u>
Food	\$ <u>750</u>	\$ <u> </u>
Clothing	\$ <u>50</u>	\$ <u> </u>
Laundry and dry-cleaning	\$ <u>65</u>	\$ <u> </u>
Medical and dental expenses	\$ <u>100</u>	\$ <u> </u>

- 08-10-00

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 125	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 75	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0	\$
Life	\$ 0	\$
Health	\$ 0	\$
Motor Vehicle	\$ 0	\$
Other: _____	\$	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$	\$
Installment payments		
Motor Vehicle	\$ 0	\$
Credit card(s)	\$ 0	\$
Department store(s)	\$ 0	\$
Other: _____	\$	\$
Alimony, maintenance, and support paid to others	\$ 200	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$
Other (specify): <u>misc</u>	\$ 160	\$
Total monthly expenses:	\$ 3455	\$

- 07-10-00

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? _____

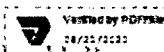
If yes, state the person's name, address, and telephone number:

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

Had the County of Sacramento not usurped my real estate and 100,000.00 of personal possessions without cause, I would be in much better financial shape.

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

Executed on: June 10, 2020

 Michael J. Besoyan
s/s Michael J. Besoyan
Michael J. Besoyan (Signature)

- 07 - 10 - 00

