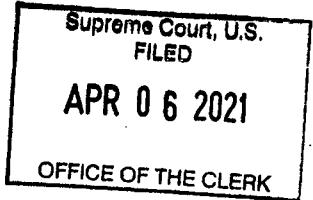


20-7828
No. _____

IN THE
SUPREME COURT OF THE UNITED STATES



KEVIN N. MITCHELL — PETITIONER
(Your Name)

VS.

DAVID SHINN ET AL. — RESPONDENT(S)

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

The petitioner asks leave to file the attached petition for a writ of certiorari without payment 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):

PETITIONER PROCEEDED IN FORMA PAUPERIS ON APPEAL IN THE UNITED STATES COURT
OF APPEALS FOR THE NINTH CIRCUIT

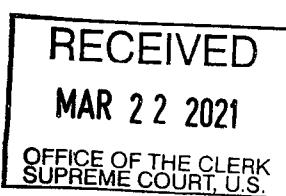
Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

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.



Kevin Mitchell
(Signature)

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

I, KEVIN N. MITCHELL, 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.

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>336</u> ⁰⁰	\$ <u>N/A</u>	\$ <u>28</u> ⁰⁰	\$ <u>N/A</u>
Self-employment	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Interest and dividends	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Gifts	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Alimony	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Child Support	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Unemployment payments	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Other (specify): _____	\$ <u>0</u>	\$ _____	\$ <u>0</u>	\$ _____
Total monthly income:	\$ <u>336</u>⁰⁰	\$ _____	\$ <u>28</u>⁰⁰	\$ _____

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
DEPT. OF CORR. SAME AS ABOVE SAME AS ABOVE	P.O.BOX 840D FLORENCE, AZ. 85132	IN DEPT. OF CORR. SINCE 2011	\$ 28 ⁰⁰ \$ \$

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
N/A	N/A	N/A	\$ N/A \$ \$

4. How much cash do you and your spouse have? \$ PRESENTLY 56⁰⁰

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
NONE	\$ 0	\$ N/A
0	\$ 0	\$
0	\$ 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 0

Other real estate
Value 0

Motor Vehicle #1
Year, make & model NONE
Value 0

Motor Vehicle #2
Year, make & model NONE
Value 0

Other assets
Description NONE
Value 0

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
0	\$ 0	\$ N/A
0	\$ 0	\$
0	\$ 0	\$

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
NONE	NONE	NONE
0	0	0
0	0	0

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 (including lot rented for mobile home)	\$ NONE	\$ N/A
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)	\$ 0	\$ 0
Home maintenance (repairs and upkeep)	\$ 0	\$ 0
Food	\$ 0	\$ 0
Clothing	\$ 0	\$ 0
Laundry and dry-cleaning	\$ 0	\$ 0
Medical and dental expenses	\$ 0	\$ 0

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <input type="radio"/>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <input type="radio"/>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <input type="radio"/>	\$ _____
Life	\$ <input type="radio"/>	\$ _____
Health	\$ <input type="radio"/>	\$ _____
Motor Vehicle	\$ <input type="radio"/>	\$ _____
Other: <u>NONE</u>	\$ <input type="radio"/>	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <input type="radio"/>	\$ _____
Installment payments		
Motor Vehicle	\$ <input type="radio"/>	\$ _____
Credit card(s)	\$ <input type="radio"/>	\$ _____
Department store(s)	\$ <input type="radio"/>	\$ _____
Other: _____	\$ <input type="radio"/>	\$ _____
Alimony, maintenance, and support paid to others	\$ <input type="radio"/>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <input type="radio"/>	\$ _____
Other (specify): <u>NONE</u>	\$ <input type="radio"/>	\$ _____
Total monthly expenses:	\$ <input type="radio"/>	\$ _____

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? NONE

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 .

If yes, how much? NONE

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 INCACERATED IN PRISON, THE PRISON SYSTEM HAS EXPENSES THAT HAS REMOVED INDIGENT ITEMS, WE MUST NOW PAY FOR ALL INDIGENT ITEMS. I'M MAKING .35 AN HOUR WHICH BARELY COVERS A SMALL AMOUNT OF INDIGENT ITEMS.

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

Executed on: MARCH 12, 2021

Kevin N. Mitchell
(Signature)