Case No.

21-5821



SUPREME COURT OF THE UNITED STATES

IN RE EDUARDO PINEDA

Supreme Court, U.S. FILED

AUG 1:3 2021

DEFICE OF THE CLERK

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The petitioner asks leave to file the attached petition for an extraordinary writ of habeas corpus without prepayment of costs and to proceed *in forma* pauperis.

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

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

(Signature)

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

	I,	EDU	JARD	O PI	NEDA	L	, a	m t	the peti	tione	r in the	above-	entitled	case.	In sup	port of
my	mo	tion	to pr	ocee	l in fe	orma									n unable	
the	cos	ts of	this	case	or to	give	securit	y ti	herefor;	and	I believe	e I am	entitled	d to re	edress.	

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.

	erage monthly am past 12 months	ount during	Amount expenses next month	ected
	You	Spouse	You	Spouse
Employment	\$ 0	\$0	\$ 0	\$0
Self-employment	\$0	\$ 0	\$ 0	\$0
Income from real property (such as rental income)	\$O	\$0	\$0	\$0
Interest and dividends	\$0	\$0	\$0	\$0
Gifts	\$ 0	\$0	\$0	\$ <u> </u>
Alimony	\$0	\$0	\$0	\$
Child Support	\$ <u> 0 </u>	\$0	\$0	\$0
Retirement (such as social security, pensions, annuities, insurance)	\$	\$0	\$0	\$
Disability (such as social security, insurance payment	\$ <u>0</u>	\$ 0	\$0	\$ 0
Unemployment payments	\$0	\$0	\$0	\$0
Public-assistance (such as welfare)	\$0	\$	\$0	\$0
Other (specify): SUPPORT FO	SR \$ 200	\$0	\$ 200	\$ <u> </u>
Total monthly incom	ne: \$ 200	s 0	s 200	\$ 0

Employer	Address	Dates of Employment	Gross monthly pay
Imprisoned	n/a	n/a	
			\$
		**************************************	\$
List your spouse's (Gross monthly pay	employment history is before taxes or	ry for the past two years other deductions.)	, most recent employer fi
Employer	Address	Dates of	Gross monthly pay
Separated	n/a	Employment n/a	s n/a
w/ No Spousal			\$ n/a \$
Support	,		\$
institution.	checking or savings	se have? \$0 spouse have in bank account Amount you have \$950	Amount your spouse ha
institution.	checking or savings	s) Amount vou have	Amount your spouse ha
institution. ype of account (e.g., Inmate Trust Fu n	checking or savings nd /a	\$ Amount you have \$ 950 \$ n/a \$	Amount your spouse has \$0 \$n/a \$
institution. ype of account (e.g., Inmate Trust Fu n	checking or savings nd /a d their values, which	s) Amount vou have	Amount your spouse has \$0 \$n/a \$
institution. Type of account (e.g., Inmate Trust Fu n . List the assets, and and ordinary house	checking or savings nd /a d their values, which	\$ Amount you have \$ 950 \$ n/a \$	Amount your spouse has \$ 0 \$ n/a \$
institution. ype of account (e.g., Inmate Trust Fu n . List the assets, and and ordinary house	checking or savings nd /a /a d their values, which	s) Amount you have \$ 950 \$ n/a \$ ch you own or your spouse	Amount your spouse has \$0 \$n/a \$ e owns. Do not list cloth
institution. Type of account (e.g., Inmate Trust Fu n . List the assets, and and ordinary house Home	checking or savings nd /a /a d their values, which	Amount you have \$ 950 \$ n/a \$ th you own or your spouse Other real estate	Amount your spouse has \$0 \$n/a \$ e owns. Do not list cloth
institution. Type of account (e.g., Inmate Trust Fu n Trust Fu n Trust Fu n List the assets, and and ordinary house Home Value n/a	checking or savings nd /a /a d their values, which	Amount you have \$ 950 \$ n/a \$ th you own or your spouse Other real estate Valuen/a	Amount your spouse has \$0 \$n/a \$ e owns. Do not list cloth
institution. ype of account (e.g., Inmate Trust Function) List the assets, and and ordinary house Home Value n/a Motor Vehicle #1 Year, make & mode	checking or savings nd /a /a d their values, which hold furnishings.	Amount you have \$ 950 \$ n/a \$ th you own or your spouse Other real estate Valuen/a Motor Vehicle # Year, make & n	Amount your spouse has \$\frac{0}{n/a}\$\$ s on the owns. Do not list clother the \$\frac{1}{2}\$ and \$\frac{n}{a}\$\$
institution. ype of account (e.g., Inmate Trust Fu n List the assets, and and ordinary house Home Valuen/a	checking or savings nd /a /a d their values, which hold furnishings.	Amount you have \$ 950 \$ n/a \$ th you own or your spouse Other real estate Valuen/a	Amount your spouse has \$\frac{0}{n/a}\$\$ s on the owns. Do not list clother the \$\frac{1}{2}\$ and \$\frac{n}{a}\$\$
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institution. Type of account (e.g., Inmate Trust Function in Inmate Trust Function in Inmate Trust Function in Inmate Trust Function in Inmate Information in Information Information in Information Information Information Information Information Information Inf	checking or savings nd /a /a d their values, which hold furnishings.	Amount you have \$ 950 \$ n/a \$ th you own or your spouse Other real estate Valuen/a Motor Vehicle # Year, make & n	Amount your spouse has \$\frac{0}{n/a}\$\$ s on the owns. Do not list clother the \$\frac{1}{2}\$ and \$\frac{n}{a}\$\$

6. State every person, bus amount owed.	siness, or organization o	wing you or you	r spouse money, and the
Person owing you or your spouse money	Amount owed to yo	ou Amou	nt owed to your spouse
None	\$n/a	\$	n/a
n/a	\$n/a	\$	n/a
n/a	\$n/a	\$	n/a
7. State the persons who relinstead of names (e.g. "J.S			minor children, list initials
Name	Relationship		Age
None	n/a		n/a
Rent or home-mortgage pay	ment	You	Your spouse
Rent or home-mortgage pay		. •	·
(include lot rented for mobile Are real estate taxes included Is property insurance included	led? ☐ Yes ☐ No	\$O	\$
Utilities (electricity, heating water, sewer, and telephone)		\$O	<u> </u>
Home maintenance (repairs	and upkeep)	\$0	<u> </u>
Food (Dietary Needs Safrom Commissary		\$ 100	<u>\$</u>
Clothing		\$0	<u> </u>
Laundry and dry-cleaning		\$0	<u> </u>
Medical and dental expenses	•	\$0	\$0

	You		You	r spous
Transportation (not including motor vehicle payments)	\$	0	_ \$	0
Recreation, entertainment, newspapers, magazines, etc.	\$	0	_ \$	0
Insurance (not deducted from wages or included in morta	gage p	ayments)		
Homeowner's or renter's	\$	0	_ \$	0
Life	\$	0	_ \$	0
Health	\$	0	_ \$	0
Motor Vehicle	\$	0 ,	\$	0
Other:n/a	\$. 0	_ \$	0
Taxes (not deducted from wages or included in mortgage	paym	ents)	•	
(specify): n/a	\$	0	_ \$	0
Installment payments				
Motor Vehicle	\$	0	. \$	0
Credit card(s)	\$	0	. \$	0
Department store(s)	\$	0	. <u>\$</u>	0
Other:n/a	\$	0	. \$	0
Alimony, maintenance, and support paid to others	\$ <u> </u>	0	\$	0
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$	0	. \$	0
Other (specify): Hygiene, Correspondence, TRULINCS (E-mail), phone	\$	100	\$	0
Total monthly expenses:	\$	200	. \$	0

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?n/a
If yes, state the attorney's name, address, and telephone number:
n/a
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 X- No
If yes, how much?n/a
If yes, state the person's name, address, and telephone number:
n/a
12. Provide any other information that will help explain why you cannot pay the costs of this case.
Currently imprisoned and have no regular income. Money I do receive is from the generosity of my family and friends. The stimulus money was a one-time event.
I declare under penalty of perjury that the foregoing is true and correct.
Executed on: <u>AUL. 05</u> , 20 <u>21</u>
Eus
(Signature)