

21-5942

No. \_\_\_\_\_

ORIGINAL

Supreme Court, U.S.  
FILED

SEP 21 2021

OFFICE OF THE CLERK

IN THE

SUPREME COURT OF THE UNITED STATES

MICHAEL WOOLSEN

(Your Name)

— PETITIONER

VS.

BRIAN KIBBLER

— 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 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):  
\_\_\_\_\_  
\_\_\_\_\_

☒ 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.

M

(Signature)

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

I, MICHAEL WOOLEN, 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>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Self-employment	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Interest and dividends	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Gifts	\$ <u>100</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Alimony	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Child Support	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Unemployment payments	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>N/A</u>	\$ _____	\$ _____
Other (specify): <u>CARES ACT</u>	\$ <u>3200</u>	\$ <u>N/A</u>	\$ _____	\$ _____
<b>Total monthly income:</b>	\$ <u>250.83</u>	\$ <u>N/A</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
N/A			\$
			\$
			\$

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			\$
			\$
			\$

4. How much cash do you and your spouse have? \$ N/A  
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
	\$	\$
	\$	\$
	\$	\$

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 N/A  
Value

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
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
N/A	_____	_____
_____	_____	_____
_____	_____	_____

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)	\$ 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)	\$ N/A	\$ _____
Home maintenance (repairs and upkeep)	\$ N/A	\$ _____
Food	\$ N/A	\$ _____
Clothing	\$ N/A	\$ _____
Laundry and dry-cleaning	\$ N/A	\$ _____
Medical and dental expenses	\$ N/A	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>N/A</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>N/A</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>N/A</u>	\$ _____
Life	\$ <u>N/A</u>	\$ _____
Health	\$ <u>N/A</u>	\$ _____
Motor Vehicle	\$ <u>N/A</u>	\$ _____
Other: _____	\$ <u>N/A</u>	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>N/A</u>	\$ _____
Installment payments		
Motor Vehicle	\$ <u>N/A</u>	\$ _____
Credit card(s)	\$ <u>N/A</u>	\$ _____
Department store(s)	\$ <u>N/A</u>	\$ _____
Other: _____	\$ <u>N/A</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>N/A</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>N/A</u>	\$ _____
Other (specify): <u>CANTEEN (INMATE STORE)</u>	\$ <u>220</u>	\$ _____
<b>Total monthly expenses:</b>	\$ <u>220</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 AM AN INMATE CURRENTLY INCARCERATED*

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

Executed on: 9/15/21, 2021



(Signature)

Case Number \_\_\_\_\_

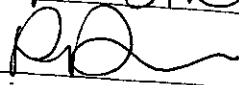
**CERTIFICATE OF FUNDS  
IN PRISONER'S ACCOUNT**

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Michael Woolen for the last six months at High Desert State Prison where (s)he is confined.

(Prisoner's Name)  
(Name of Institution)

I further certify that the average deposits each month to this prisoner's account for the most recent six-month period were \$ 250.83 and the average balance in the prisoner's account each month for the most recent six-month period was \$ 1542.05.

Date: 9/17/21

Officer Name: ROBIN Dupre  
Signature:   
Authorized Officer of the Institution

**RECEIVED**  
**SEP 28 2021**  
**OFFICE OF THE CLERK  
SUPREME COURT, U.S.**



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ATTEST:  
CALIFORNIA DEPARTMENT OF CORRECTIONS  
BY RD  
TRUST OFFICE

Institution: HDSP

## Inmate Statement Report

CDCR#	Inmate/Group Name	Institution	Unit	Cell/Bed
J92882	WOOLEN, MICHAEL	HDSP	C 002 2	230001

Current Available Balance: \$1,107.52

**Transaction List**

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
03/17/2021	HDSP	BEGINNING BALANCE				\$796.03
03/17/2021	HDSP	MISC CHARGES DUE STATE	NOTARY		(\$15.00)	\$781.03
03/18/2021	HDSP	JPAY	0000000128865813		\$100.00	\$881.03
03/18/2021	HDSP	SPO WITHDRAWAL	MEET/INMATE	935523	(\$70.00)	\$811.03
03/18/2021	HDSP	IWF FEE	MEET/INMATE		(\$7.00)	\$804.03
03/21/2021	HDSP	KIOSK REQUEST			(\$10.00)	\$794.03
03/23/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$789.03
03/24/2021	HDSP	KIOSK REQUEST			(\$5.25)	\$783.78
03/25/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$778.78
03/29/2021	HDSP	LEGAL MAIL	LM 3/24/21		(\$8.85)	\$769.93
03/29/2021	HDSP	LEGAL COPY	LC 3/24/21		(\$22.40)	\$747.53
03/29/2021	HDSP	LEGAL COPY	LC 3/24/21		(\$1.40)	\$746.13
03/31/2021	HDSP	JPAY	0000000129401942		\$300.00	\$1,046.13
03/31/2021	HDSP	JPAY	0000000129401944		\$500.00	\$1,546.13
04/04/2021	HDSP	KIOSK REQUEST			(\$10.00)	\$1,536.13
04/08/2021	HDSP	LEGAL MAIL	LM 4/7/21		(\$1.60)	\$1,534.53
04/08/2021	HDSP	LEGAL MAIL	LM 4/7/21		(\$2.80)	\$1,531.73
04/08/2021	HDSP	COPY CHARGES	LIBRARY COPIES		(\$2.80)	\$1,528.93
04/14/2021	HDSP	KIOSK REQUEST			(\$10.00)	\$1,518.93
04/16/2021	HDSP	LEGAL MAIL	LM 4/8/21		(\$1.60)	\$1,517.33
04/16/2021	HDSP	LEGAL MAIL	LM 4/9/21		(\$10.10)	\$1,507.23
04/19/2021	HDSP	KIOSK REQUEST			(\$10.00)	\$1,497.23
04/27/2021	HDSP	KIOSK REQUEST			(\$3.41)	\$1,493.82
04/29/2021	HDSP	LEGAL MAIL	LM 4/26/21		(\$9.05)	\$1,484.77
04/29/2021	HDSP	LEGAL MAIL	LM 4/26/21		(\$9.90)	\$1,474.87
04/29/2021	HDSP	LEGAL MAIL	LM 4/26/21		(\$11.10)	\$1,463.77
04/29/2021	HDSP	LEGAL COPY	LC 4/22/21		(\$5.00)	\$1,458.77
04/29/2021	HDSP	LEGAL MAIL	LM 4/29/21		(\$10.10)	\$1,448.67
05/07/2021	HDSP	KIOSK REQUEST			(\$6.45)	\$1,442.22
05/12/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,437.22
05/15/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,432.22
05/19/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,427.22
05/23/2021	HDSP	SALES	25		(\$208.20)	\$1,219.02
05/25/2021	HDSP	KIOSK REQUEST			(\$7.00)	\$1,212.02



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ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY

TRUST OFFICE



Institution: HDSP

## Inmate Statement Report

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
05/26/2021	HDSP	JPAY	0000000131415398		\$40.00	\$1,252.02
05/26/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,247.02
06/02/2021	HDSP	KIOSK REQUEST			(\$20.00)	\$1,227.02
06/04/2021	HDSP	JPAY	0000000131723203		\$100.00	\$1,327.02
06/04/2021	HDSP	LEGAL COPY	LC 5/18/21		(\$11.70)	\$1,315.32
06/04/2021	HDSP	LEGAL COPY	LC 5/17/21		(\$33.00)	\$1,282.32
06/04/2021	HDSP	LEGAL COPY	LC 5/17/21		(\$56.60)	\$1,225.72
06/04/2021	HDSP	LEGAL COPY	LC 5/17/21		(\$11.70)	\$1,214.02
06/04/2021	HDSP	LEGAL MAIL	LM 6/3/21		(\$10.10)	\$1,203.92
06/04/2021	HDSP	COPY CHARGES	LIBRARY COPIES		(\$4.40)	\$1,199.52
06/04/2021	HDSP	COPY CHARGES	LIBRARY COPIES		(\$1.20)	\$1,198.32
06/07/2021	HDSP	KIOSK REQUEST			(\$20.00)	\$1,178.32
06/12/2021	HDSP	JPAY	0000000132006192		\$50.00	\$1,228.32
06/20/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,223.32
06/22/2021	HDSP	SALES	59		(\$102.80)	\$1,120.52
06/23/2021	HDSP	KIOSK REQUEST			(\$2.00)	\$1,118.52
06/25/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,113.52
06/27/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,108.52
06/30/2021	HDSP	KIOSK REQUEST			(\$2.00)	\$1,106.52
07/07/2021	HDSP	JPAY	0000000132803775		\$100.00	\$1,206.52
07/07/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,201.52
07/08/2021	HDSP	JPAY	0000000132825284		\$30.00	\$1,231.52
07/09/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$1,226.52
07/14/2021	HDSP	LEGAL MAIL	LM 7/12/21		(\$3.40)	\$1,223.12
07/14/2021	HDSP	LEGAL MAIL	LM 7/12/21		(\$2.20)	\$1,220.92
07/14/2021	HDSP	LEGAL MAIL	LM 7/12/21		(\$3.40)	\$1,217.52
07/14/2021	HDSP	LEGAL MAIL	LM 6/24/21		(\$8.85)	\$1,208.67
07/14/2021	HDSP	LEGAL MAIL	LM 6/29/21		(\$13.90)	\$1,194.77
07/15/2021	HDSP	REGULAR MAIL	POSTAGE		(\$15.20)	\$1,179.57
07/16/2021	HDSP	JPAY	0000000133066762		\$120.00	\$1,299.57
07/16/2021	HDSP	LEGAL COPY	LC 6/22/21		(\$18.60)	\$1,280.97
07/16/2021	HDSP	LEGAL COPY	LC 6/22/21		(\$50.40)	\$1,230.57
07/16/2021	HDSP	COPY CHARGES	LIBRARY COPIES		(\$3.40)	\$1,227.17
07/20/2021	HDSP	SALES	33		(\$218.00)	\$1,009.17
07/28/2021	HDSP	LEGAL COPY	LC 7/20/21		(\$1.00)	\$1,008.17
07/28/2021	HDSP	LEGAL COPY	LC 7/20/21		(\$11.00)	\$997.17
07/28/2021	HDSP	LEGAL COPY	LC 7/15/21		(\$4.00)	\$993.17
07/28/2021	HDSP	LEGAL COPY	LC 7/15/21		(\$27.60)	\$965.57
07/28/2021	HDSP	LEGAL MAIL	LM 7/19/21		(\$3.20)	\$962.37
07/28/2021	HDSP	LEGAL MAIL	LM 7/19/21		(\$3.20)	\$959.17
07/28/2021	HDSP	LEGAL MAIL	LM 7/22/21			\$956.37



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ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

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Institution: HDSP

## Inmate Statement Report

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
07/28/2021	HDSP	REGULAR MAIL	POSTAGE		(\$2.80)	\$953.57
07/29/2021	HDSP	KIOSK REQUEST			(\$5.00)	\$948.57
07/31/2021	HDSP	JPAY	0000000133531155		\$50.00	\$998.57
07/31/2021	HDSP	JPAY	0000000133531156		\$40.00	\$1,038.57
08/04/2021	HDSP	COPY CHARGES	LEGAL LOG COPY		(\$0.20)	\$1,038.37
08/08/2021	HDSP	KIOSK REQUEST			(\$10.00)	\$1,028.37
08/11/2021	HDSP	JPAY	0000000133909846		\$50.00	\$1,078.37
08/19/2021	HDSP	LEGAL MAIL	LM- 08.17.21		(\$1.60)	\$1,076.77
08/19/2021	HDSP	LEGAL MAIL	LM - 08.17.21		(\$1.60)	\$1,075.17
08/19/2021	HDSP	LEGAL MAIL	LM - 08.17.21		(\$1.60)	\$1,073.57
08/22/2021	HDSP	SALES	24		(\$173.25)	\$900.32
08/24/2021	HDSP	LEGAL COPY	LC 08.12.21		(\$8.60)	\$891.72
08/24/2021	HDSP	LEGAL COPY	LC 08.12.21		(\$0.80)	\$890.92
08/25/2021	HDSP	KIOSK REQUEST			(\$10.00)	\$880.92
08/25/2021	HDSP	LEGAL COPY	LC 08.23.21		(\$0.40)	\$880.52
08/25/2021	HDSP	LEGAL COPY	LC 08.20.2021		(\$7.00)	\$873.52
08/31/2021	HDSP	JPAY	0000000134533521		\$125.00	\$998.52
09/01/2021	HDSP	REGULAR MAIL	POSTAGE		(\$1.00)	\$997.52
09/02/2021	HDSP	JPAY	0000000134592364		\$40.00	\$1,037.52
09/02/2021	HDSP	JPAY	0000000134592365		\$50.00	\$1,087.52
09/05/2021	HDSP	JPAY	0000000134700534		\$30.00	\$1,117.52
09/08/2021	HDSP	COPY CHARGES	LIBRARY COPIES		(\$5.00)	\$1,112.52
09/14/2021	HDSP	COPY CHARGES	LIBRARY COPIES		(\$5.00)	\$1,107.52

**Encumbrance List**

Encumbrance Type	Transaction Date	Amount
**No information was found for the given criteria.**		

**Obligation List**

Obligation Type	Court Case#	Original Owed Balance	Sum of Tx for Date Range for Oblg	Current Balance
**No information was found for the given criteria.**				

**Restitution List**

Restitution	Court Case#	Status	Original Owed Balance	Interest Accrued	Sum of Tx for Date Range for Oblg	Current Balance
RESTITUTION FINE	VA034957	Fulfilled	\$200.00	\$0.00	\$0.00	\$0.00
RESTITUTION FINE	VA040153	Fulfilled	\$200.00	\$0.00	\$0.00	\$0.00
RESTITUTION FINE	BA160854	Fulfilled	\$200.00	\$0.00	\$0.00	\$0.00
RESTITUTION FINE	TA101715	Fulfilled	\$800.00	\$0.00	\$0.00	\$0.00



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## Inmate Statement Report

Restitution	Court Case#	Status	Original Owed Balance	Interest Accrued	Sum of Tx for Date Range for Oblg	Current Balance
RESTITUTION FINE	TA070163	Fulfilled	\$200.00	\$0.00	\$0.00	\$0.00
RESTITUTION FINE	13CM7722	Fulfilled	\$280.00	\$0.00	\$0.00	\$0.00



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