

APR 19 2022

OFFICE OF THE CLERK

STEVEN GUARDADO,
ASPC YUMA-CIBOLA,
P. O. BOX
SAN LUIS, AZ
PETITIONER

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8909
85349
PRO SE

21-7872

STEVEN GUARDADO,

Petitioner

v.

THE HON. BILLY K. SIPE, JR., COMMISSIONER,
MICHIGAN COUNTY SUPERIOR COURT; AND THE HON.
JON W. THOMPSON, MAURICE PORTLEY, AND R. NORRIS,
JUDGES OF DIVISION ONE, ARIZONA COURT OF APPEALS;
STATE OF ARIZONA, REAL PARTY IN INTEREST,

Respondents.

ON PETITION FOR A WRIT OF
CERTIORARI TO THE
SUPREME COURT OF ARIZONA
No. M-21-0076

MOTION TO PROCEED
IN FORMA PAUPERIS

THE UNDERSIGNED HEREBY CERTIFIES THAT HE IS PETITIONER IN THE ABOVE
ENCAPTIONED PETITION FOR A WRIT OF CERTIORARI, AND THAT HE HEREBY MOVES
THIS COURT FOR LEAVE TO PROCEED IN FORMA PAUPERIS, PURSUANT TO SUPREME
COURT RULE 39 AND 12-2, AS AN INMATE CONFINED AT THE INSTITUTION SHOWN ABOVE.

AN AFFIDAVIT IN SUPPORT IS ATTACHED. HE DOES SO TO SEEK THE GRANT
PROVIDED UNDER SUPREME COURT RULE 39-4 ALLOWING THE DOCKETING OF
THE PETITION, AND FOR ITS ACCOMPANYING PAPERS, WITHOUT FEE.

WHEREFORE, THE PETITIONER PRAYS THAT THE COURT GRANT THIS MOTION,
FOR LEAVE TO PROCEED IN FORMA PAUPERIS, AND TO FILE THE PETITION AND
THIS MOTION.

I DECLARE PURSUANT TO 28 USC § 1746 THAT THE FOREGOING IS TRUE
AND CORRECT, AND IS SUPPORTED BY A TRUE AND CORRECT COPY OF
THE ATTACHED AFFIDAVIT.

RESPECTFULLY SUBMITTED THIS 18th DAY OF APRIL, 2022.

S. Guardado

ISI STEVEN GUARDADO
PETITIONER PRO SE

STEVEN GUARDADO
ASPC YUMA-CIBOLA
P. O. BOX
SAN LUIS, AZ

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

I, STEVEN GUARDADO, 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>24⁰⁰</u>	\$ <u>N/A</u>	\$ <u> </u>	\$ <u>N/A</u>
Self-employment	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Income from real property (such as rental income)	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Interest and dividends	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Gifts	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Alimony	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Child Support	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Disability (such as social security, insurance payments)	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Unemployment payments	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Public-assistance (such as welfare)	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Other (specify): _____	\$ <u>—</u>	\$ <u> </u>	\$ <u>—</u>	\$ <u> </u>
Total monthly income:	\$ <u>24⁰⁰</u>	\$ <u>N/A</u>	\$ <u> </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
ASPC YUMA-CIBOLA	P. O. BOX 8909 SAN LUIS, AZ 85349	IN CUSTODY SINCE 2014	\$ 24.74
			\$
			\$
			\$

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? \$ 0

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial institution	Type of account	Amount you have	Amount your spouse has
N/A		\$	\$
		\$	\$
		\$	\$

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
<u>N/A</u>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
<u>N/A</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)	\$ 0	\$ <u>N/A</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)	\$ 0	\$ _____
Home maintenance (repairs and upkeep)	\$ 0	\$ _____
Food	\$ 0	\$ _____
Clothing	\$ 0	\$ _____
Laundry and dry-cleaning	\$ 0	\$ _____
Medical and dental expenses	\$ 0	\$ _____

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

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 HAVE BEEN IMPRISONED FOR OVER EIGHT YEARS.

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

Executed on: 18 APRIL, 2022


S. Guardado
151 STEVEN GUARDADO

(Signature)