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ORIGINAL

UNITED STATES COURT OF APPEALS
FOR THE NINTH CIRCUIT

FILED
MAY 18 2022

OFFICE OF THE CLERK
SUPREME COURT, U.S.

Form 4. Motion and Affidavit for Permission to Proceed in Forma Pauperis

Instructions for this form: <http://www.ca9.uscourts.gov/forms/form04instructions.pdf>

9th Cir. Case Number(s) **21-15943**

Case Name **Dunn v. County of Santa Cruz**

Affidavit in support of motion: I swear under penalty of perjury that I am financially unable to pay the docket and filing fees for my appeal. I believe my appeal has merit. I swear under penalty of perjury under United States laws that my answers on this form are true and correct. 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Signature 

Date **08/02/2022**

The court may grant a motion to proceed in forma pauperis if you show that you cannot pay the filing fees **and** you have a non-frivolous legal issue on appeal. Please state your issues on appeal. (attach additional pages if necessary)

** See Presented Questions*

Feedback or questions about this form? Email us at forms@ca9.uscourts.gov

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	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Self-Employment	\$ <input type="text"/> 1,233	\$ <input type="text"/>	\$ <input type="text"/> 1,200	\$ <input type="text"/>
Income from real property (such as rental income)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Interest and Dividends	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Gifts	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alimony	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Child Support	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Retirement (such as social security, pensions, annuities, insurance)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Disability (such as social security, insurance payments)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Unemployment Payments	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Public-Assistance (such as welfare)	\$ <input type="text"/> Standard \$ Single Adult	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other (specify) <i>Series EE Bonds</i>	\$ <input type="text"/> 800	\$ <input type="text"/>	\$ <input type="text"/> Maybe \$200	\$ <input type="text"/>
TOTAL MONTHLY INCOME:	\$ <input type="text"/> 2,033	\$ <input type="text"/>	\$ <input type="text"/> 1,400	\$ <input type="text"/>

2. List your 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
DoorDash, Inc.		From <u>≈ 01/10/21</u> \$ <u>1100</u> To <u>Current</u> \$ <u>[REDACTED]</u>	
QuickStop (up-the-table under)		From <u>≈ 01/03/21</u> \$ <u>[REDACTED]</u> To <u>01/03/21</u> \$ <u>70 (unpaid)</u>	
		From <u>[REDACTED]</u> \$ <u>[REDACTED]</u> To <u>[REDACTED]</u> \$ <u>[REDACTED]</u>	
		From <u>[REDACTED]</u> \$ <u>[REDACTED]</u> To <u>[REDACTED]</u> \$ <u>[REDACTED]</u>	

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
		From <u>[REDACTED]</u> \$ <u>[REDACTED]</u> To <u>[REDACTED]</u> \$ <u>[REDACTED]</u>	
		From <u>[REDACTED]</u> \$ <u>[REDACTED]</u> To <u>[REDACTED]</u> \$ <u>[REDACTED]</u>	
		From <u>[REDACTED]</u> \$ <u>[REDACTED]</u> To <u>[REDACTED]</u> \$ <u>[REDACTED]</u>	
		From <u>[REDACTED]</u> \$ <u>[REDACTED]</u> To <u>[REDACTED]</u> \$ <u>[REDACTED]</u>	

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

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
Customer's Bank?	Checkings Savings	\$ 1.97	\$
		\$ 0	\$
		\$ 	\$
		\$ 	\$

N/A

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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

Home	Value	Other Real Estate	Value
	\$ 		\$

Motor Vehicle 1: Make & Year	Model	Registration #	Value
Honda 2001	Accord EX-L V6		\$ 3800
Motor Vehicle 2: Make & Year	Model	Registration #	Value
		1HGCM66581A061796	

Other Assets	Value
Laptop	\$ 350
iPhone	\$ 623
Printer & Misc.	\$ 250

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse	Amount owed to you	Amount owed to your spouse
QuikStop	\$ ≈ 70	\$ [signature]
	\$ [signature]	\$ [signature]
	\$ [signature]	\$ [signature]

7. State the persons who rely on you or your spouse for support. If a dependent is a minor, list only the initials and not the full name.

Name	Relationship	Age
[signature]	[signature]	[signature]
[signature]	[signature]	[signature]
[signature]	[signature]	[signature]

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, semiannually, or annually to show the monthly rate.

	You	Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ <u>850/mo</u>	\$ <u></u>
- Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
- Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>±50/mo</u>	\$ <u></u>
Home maintenance (repairs and upkeep)	\$ <u>—</u>	\$ <u></u>
Food	\$ <u>300</u>	\$ <u></u>
Clothing	\$ <u>40</u>	\$ <u></u>
Laundry and dry-cleaning	\$ <u>40</u>	\$ <u></u>
Medical and dental expenses	\$ <u>Denti-Cal</u>	\$ <u></u>
Transportation (not including motor vehicle payments)	\$ <u>Gas</u> <u>DoorDash</u>	\$ <u>266/mo</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>100</u>	\$ <u></u>
Insurance (not deducted from wages or included in mortgage payments)		
- Homeowner's or renter's	\$ <u>0</u>	\$ <u></u>
- Life	\$ <u>—</u>	\$ <u></u>
- Health	\$ <u>0</u>	\$ <u></u>
- Motor Vehicle	\$ <u>0</u>	\$ <u></u>
- Other <u>Phone</u>	\$ <u>±20/mo</u>	\$ <u></u>
Taxes (not deducted from wages or included in mortgage payments)		
Specify <u></u>	\$ <u></u>	\$ <u></u>

	You	Spouse
Installment payments		
- Motor Vehicle	\$ []	\$ []
- Credit Card (name) []	\$ []	\$ []
- Department Store (name) []	\$ []	\$ []
Alimony, maintenance, and support paid to others	\$ []	\$ []
Regular expenses for the operation of business, profession, or farm (attach detailed statement)	\$ []	\$ []
Other (specify) []	\$ []	\$ []
TOTAL MONTHLY EXPENSES	\$ []	\$ []

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 spent—or will you be spending—any money for expenses or attorney fees in connection with this lawsuit? Yes No

If Yes, how much? \$ 1200

11. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

Indigent

12. State the city and state of your legal residence.

City Hollywood

State CA

Your daytime phone number (ex., 415-355-8000)

(323) 975-0024

Your age 28

Your years of schooling 19

Currently
out of
service