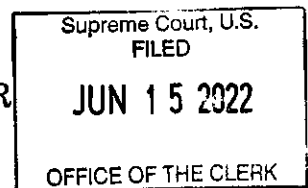


No. **22-5407**

**ORIGINAL**

IN THE  
SUPREME COURT OF THE UNITED STATES

JAMES RUSSELL AUSTIN — PETITIONER  
(Your Name)



VS.  
JEROME FARRIS, Senior Circuit Judge;  
and MARY H. MUGUIA, Circuit Judge — 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):

U.S. District Court for Central California, Los Angeles

U.S. 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.

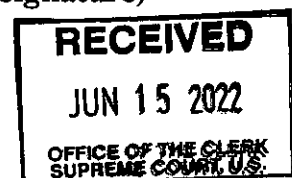
☐ Petitioner's affidavit or declaration is **not** attached because the court below appointed counsel in the current proceeding, and:

☐ The appointment was made under the following provision of law: \_\_\_\_\_, or

☐ a copy of the order of appointment is appended.

6-8-22

James Austin  
(Signature)



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

I, JAMES RUSSELL AUSTIN, 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	\$ 0.00	\$	\$	\$
Self-employment	\$ 0.00	\$	\$	\$
Income from real property (such as rental income)	\$ 0.00	\$	\$	\$
Interest and dividends	\$ 0.00	\$	\$	\$
Gifts	\$ 0.00	\$	\$	\$
Alimony	\$ 0.00	\$	\$	\$
Child Support	\$ 0.00	\$	\$	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ 0.00	\$	\$	\$
Disability (such as social security, insurance payments)	\$ 0.00	\$	\$	\$
Unemployment payments	\$ 0.00	\$	\$	\$
Public-assistance (such as welfare)	\$ 0.00	\$	\$	\$
Other (specify):	\$ 0.00	\$	\$	\$
<b>Total monthly income:</b>	\$ 0.00	\$	\$	\$

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
			\$ 0.00
			\$ 0.00
			\$ 0.00

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
			\$ 0.00
			\$ 0.00
			\$ 0.00

4. How much cash do you and your spouse have? \$ 0.00

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
	\$ 0.00	\$
	\$ 0.00	\$
	\$ 0.00	\$

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings. None I have no assets, values to report or that I own.

☐ Home I do not own a home.  
Value 0.00

☐ Other real estate I do not have real estate.  
Value 0.00

☐ Motor Vehicle #1 I do not own a vehicle.  
Year, make & model  
Value 0.00

☐ Motor Vehicle #2 Again, I do not own a vehicle.  
Year, make & model  
Value 0.00-

☐ Other assets None I have no other assets to report or that I own.  
Description  
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
_____	\$ 0.00	\$ _____
_____	\$ 0.00	\$ _____
_____	\$ 0.00	\$ _____

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"). None N/A I have no one who relies on me for support. I have no minor children.

Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

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)	\$ 0.00	\$ _____
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)	\$ 0.00	\$ _____
Home maintenance (repairs and upkeep)	\$ 0.00	\$ _____
Food	\$ 0.00	\$ _____
Clothing	\$ 0.00	\$ _____
Laundry and dry-cleaning	\$ 0.00	\$ _____
Medical and dental expenses	\$ 0.00	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 0.00	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 0.00	\$
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ 0.00	\$
Life	\$ 0.00	\$
Health	\$ 0.00	\$
Motor Vehicle	\$ 0.00	\$
Other: _____	\$ 0.00	\$
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ 0.00	\$
Installment payments		
Motor Vehicle	\$ 0.00	\$
Credit card(s)	\$ 0.00	\$
Department store(s)	\$ 0.00	\$
Other: _____	\$ 0.00	\$
Alimony, maintenance, and support paid to others	\$ 0.00	\$
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0.00	\$
Other (specify): _____	\$ 0.00	\$
<b>Total monthly expenses:</b>	\$ 0.00	\$

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? \_\_\_\_\_

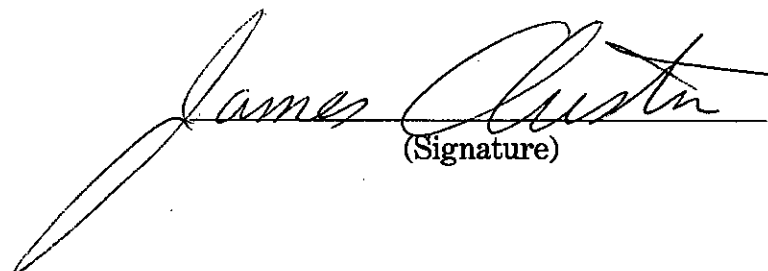
If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the costs of this case.

I am incarcerated and indigent status.

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

Executed on: 5-13, 20 22

  
(Signature)

If you are a prisoner, you must have an officer from your institution provide this official certificate as to the amount of money in your prison account.

**PRISON CERTIFICATE**

(Incarcerated applicants only)

(To be completed by the institution of incarceration)

I certify that the applicant AUSTIN, JAMES

(NAME OF INMATE)

AK6078

(INMATE'S CDC NUMBER)

Has the sum of \$ 1.57 on account to his/her credit at

RICHARD J. DONOVAN CORRECTIONAL FACILITY

(NAME OF INSTITUTION)

I further certify that the applicant has the following securities N/A

to his/her credit according to the records of the aforementioned institution. I further certify that during the past six months the applicant's average monthly balance was \$ 2452.13

and the average monthly deposits to the applicant's account was \$ 27.58

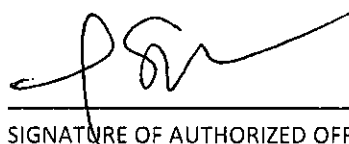
**ALL PRISONERS MUST ATTACH A CERTIFIED COPY OF THEIR TRUST ACCOUNT**

**STATEMENT SHOWING TRANSACTIONS FOR THE SIX-MONTH PERIOD**

**IMMEDIATELY PRECEDING THE FILING OF THE COMPLAINT PER 28 U.S.C. § 1915(A) (2).**

05/20/2022

DATE



SIGNATURE OF AUTHORIZED OFFICER OF INSTITUTION

Fabiola Silva

OFFICER'S FULL NAME (PRINTED)

Accounting Officer Specialist

OFFICER'S TITLE/RANK

Institution: RJD

## Inmate Statement Report

CDCR#	Inmate/Group Name	Institution	Unit	Cell/Bed
AK6078	AUSTIN, JAMES	RJD	E 025C1	104004

Current Available Balance: \$1.57

## Transaction List

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
11/20/2021	RJD	BEGINNING BALANCE				\$2,681.81
12/01/2021	RJD	PLRA	APPEAL3: 16CV02088JLB	1106350	(\$1.67)	\$2,680.14
12/01/2021	RJD	PLRA	3:18-CV00600-WQH-JLB	1106350	(\$6.62)	\$2,673.52
12/01/2021	RJD	PLRA	3:16-CV02088-CAB-JLB	1106350	(\$6.62)	\$2,666.90
12/06/2021	RJD	I/M PAY - SUPPORT	NOV 2021- FC E		\$32.16	\$2,699.06
12/06/2021	RJD	RESTITUTION FINE PAYMENT	NOV 2021- FC E		(\$16.08)	\$2,682.98
12/06/2021	RJD	ADMINISTRATIVE FEE	NOV 2021- FC E		(\$1.60)	\$2,681.38
12/14/2021	RJD	SPO WITHDRAWAL	VIT OUTLET	1106533	(\$98.00)	\$2,583.38
12/14/2021	RJD	IWF FEE	VIT OUTLET		(\$9.20)	\$2,574.18
12/23/2021	RJD	SALES	37		(\$150.55)	\$2,423.63
12/23/2021	RJD	LEGAL MAIL	12/16/21-12/23/21		(\$2.76)	\$2,420.87
12/23/2021	RJD	LEGAL MAIL	12/16/21-12/23/21		(\$2.96)	\$2,417.91
01/01/2022	RJD	PLRA	APPEAL3: 16CV02088JLB	1107997	(\$1.62)	\$2,416.29
01/01/2022	RJD	PLRA	3:18-CV00600-WQH-JLB	1107997	(\$6.43)	\$2,409.86
01/01/2022	RJD	PLRA	3:16-CV02088-CAB-JLB	1107997	(\$6.43)	\$2,403.43
01/25/2022	RJD	SALES	50		(\$63.30)	\$2,340.13
02/03/2022	RJD	I/M PAY - SUPPORT	JAN 2022 FAC E		\$33.36	\$2,373.49
02/03/2022	RJD	RESTITUTION FINE PAYMENT	JAN 2022 FAC E		(\$16.68)	\$2,356.81
02/04/2022	RJD	LEGAL MAIL	020322/020422		(\$2.16)	\$2,354.65
02/20/2022	RJD	SALES	18		(\$45.10)	\$2,309.55
02/25/2022	RJD	LEGAL MAIL	022422/022522		(\$2.16)	\$2,307.39
03/01/2022	RJD	PLRA	APPEAL3: 16CV02088JLB	1107477	(\$3.34)	\$2,304.05
03/01/2022	RJD	PLRA	3:18-CV00600-WQH-JLB	1107477	(\$6.67)	\$2,297.38
03/01/2022	RJD	PLRA	3:16-CV02088-CAB-JLB	1107477	(\$6.67)	\$2,290.71
03/03/2022	RJD	I/M PAY - SUPPORT	FEB 2022 FAC E		\$26.64	\$2,317.35
03/03/2022	RJD	RESTITUTION FINE PAYMENT	FEB 2022 FAC E		(\$13.32)	\$2,304.03
03/25/2022	RJD	SALES	26		(\$96.95)	\$2,207.08
04/01/2022	RJD	PLRA	APPEAL3: 16CV02088JLB	1107770	(\$2.68)	\$2,204.40



THE WITHIN INSTRUMENT IS A CORRECT  
COPY OF THE TRUST ACCOUNT MAINTAINED  
BY THIS OFFICE.

ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY   
TRUST OFFICE



## Inmate Statement Report

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
04/01/2022	RJD	PLRA	3:18-CV00600-WQH-JLB	1107770	(\$5.32)	\$2,199.08
04/01/2022	RJD	PLRA	3:16-CV02088-CAB-JLB	1107770	(\$5.32)	\$2,193.76
04/04/2022	RJD	LEGAL MAIL	032422/040422		(\$2.56)	\$2,191.20
04/04/2022	RJD	LEGAL MAIL	032422/040422		(\$2.56)	\$2,188.64
04/04/2022	RJD	LEGAL MAIL	032922/040422		(\$2.56)	\$2,186.08
04/05/2022	RJD	I/M PAY - SUPPORT	MAR 2022- FC		\$30.36	\$2,216.44
04/05/2022	RJD	RESTITUTION FINE PAYMENT	MAR 2022- FC		(\$15.18)	\$2,201.26
04/06/2022	RJD	I/M PAY - SUPPORT	FAC E DEC 2021		\$23.52	\$2,224.78
04/06/2022	RJD	RESTITUTION FINE PAYMENT	FAC E DEC 2021		(\$11.76)	\$2,213.02
04/14/2022	RJD	LEGAL MAIL	040722/0414/22		(\$1.96)	\$2,211.06
04/25/2022	RJD	SALES	58		(\$161.45)	\$2,049.61
04/27/2022	RJD	INMATE VOLUNTARY WITHDRAWAL	TWO- V A WELLS	1108031	(\$1,950.00)	\$99.61
05/01/2022	RJD	PLRA	APPEAL3: 16CV02088JLB	1108113	(\$5.40)	\$94.21
05/01/2022	RJD	PLRA	3:18-CV00600-WQH-JLB	1108113	(\$10.77)	\$83.44
05/01/2022	RJD	PLRA	3:16-CV02088-CAB-JLB	1108113	(\$10.77)	\$72.67
05/04/2022	RJD	I/M PAY - SUPPORT	APRIL 2022 FAC E		\$19.44	\$92.11
05/04/2022	RJD	RESTITUTION FINE PAYMENT	APRIL 2022 FAC E		(\$9.72)	\$82.39
05/11/2022	RJD	SALES	30		(\$70.40)	\$11.99
05/16/2022	RJD	LEGAL COPY	LIBL-051022/051622		(\$0.60)	\$11.39
05/16/2022	RJD	LEGAL COPY	LIBL-051322/051622		(\$0.10)	\$11.29

**Encumbrance List**

Encumbrance Type	Transaction Date	Amount
Other Encumbrance	05/04/2022	\$3.88
Other Encumbrance	05/04/2022	\$3.88
Other Encumbrance	05/04/2022	\$1.96

**Obligation List**

Obligation Type	Court Case#	Original Owed Balance	Sum of Tx for Date Range for Oblg	Current Balance
COPY CHARGES	1/12/15	\$4.00	\$0.00	\$4.00
COPY CHARGES	051415/051915	\$1.00	\$0.00	\$1.00
COPY CHARGES	060115/061115	\$0.60	\$0.00	\$0.60
COPY CHARGES	070815/072115	\$0.40	\$0.00	\$0.40
COPY CHARGES	070815/072115	\$0.40	\$0.00	\$0.40
COPY CHARGES	051716/M-041516	\$8.40	\$0.00	\$8.40
PLRA	3:16-CV02088-CAB-JLB	\$350.00	(\$35.81)	\$268.93



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ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS 3

BY TRUST OFFICER

Institution: RJD

## Inmate Statement Report

Obligation Type	Court Case#	Original Owed Balance	Sum of Tx for Date Range for Oblg	Current Balance
PLRA	3:18-CV00600-WQH-JLB	\$350.00	(\$35.81)	\$292.79
PLRA	APPEAL3: 16CV02088JLB	\$505.00	(\$14.71)	\$483.95
COPY CHARGES	091818/092418- 119	\$3.00	\$0.00	\$3.00
COPY CHARGES	101618/111418	\$0.10	\$0.00	\$0.10
REGULAR MAIL	60619/61019	\$1.75	\$0.00	\$1.75
COPY CHARGES	71919/72619	\$1.70	\$0.00	\$1.70
COPY CHARGES	182020/1232020	\$0.30	\$0.00	\$0.30
PLRA	3:18CV00600WQH-JLB	\$505.00	\$0.00	\$505.00

**Restitution List**

Restitution	Court Case#	Status	Original Owed Balance	Interest Accrued	Sum of Tx for Date Range for Oblg	Current Balance
DIRECT ORDER	PA064769	Fulfilled	\$612.00	\$0.00	\$0.00	\$0.00
RESTITUTION FINE	PA064769	Active	\$800.00	\$0.00	(\$82.74)	\$686.30



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ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY [Signature]  
TRUST OFFICE

Institution: RJD

### Inmate Statement Report

<b>Start Date:</b>	11/20/2021	<b>Revalidation Cycle:</b>	All
<b>End Date:</b>	5/20/2022	<b>Housing Unit:</b>	All
<b>Inmate/Group#:</b>	AK6078		



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BY *[Signature]*  
TRUST OFFICE