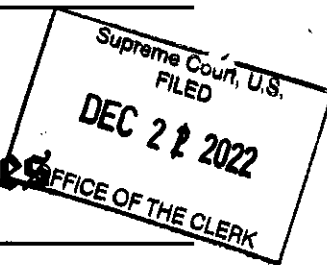


No. **22-6442**

**ORIGINAL**

**In the  
Supreme Court of the United States**



**BRENNAN T. BAKER – PETITIONER**

**VS.**

**STATE OF WYOMING – RESPONDENT(S)**

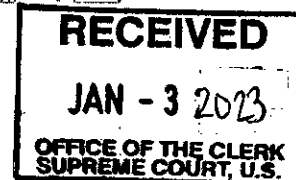
**ON PETITION FOR A WRIT OF CERTIORARI TO  
WYOMING SUPREME COURT**

**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*.

Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

- (a) Name of Court: Sixth Judicial District Court for Campbell County, Wyoming  
Docket Number: CR-8652  
Case Caption: *State of Wyoming vs. Baker*
- (b) Name of Court: Sixth Judicial District Court for Campbell County, Wyoming  
Docket Number: CR-8702  
Case Caption: *State of Wyoming vs. Baker*



(c) Name of Court: Sixth Judicial District Court for Campbell County, Wyoming  
Docket Number: CR-9456  
Case Caption: *State of Wyoming vs. Baker*

(d) Name of Court: Sixth Judicial District Court for Campbell County, Wyoming  
Docket Number: CR-9457  
Case Caption: *State of Wyoming vs. Baker*

(e) Name of Court: Sixth Judicial District Court for Campbell County, Wyoming  
Docket Number: CR-9458  
Case Caption: *State of Wyoming vs. Baker*

(f) Name of Court: Wyoming Supreme Court  
Docket Number: S-2022-0022  
Case Caption: *Baker v. State of Wyoming*

(g) Name of Court: Wyoming Supreme Court  
Docket Number: S-2022-0023  
Case Caption: *Baker v. State of Wyoming*

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

DATED this \_\_\_\_\_ day of December, 2022.

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Brennan T. Baker, Petitioner, pro se  
WMCI #33896  
7076 Road 55F  
Torrington, WY 82240-7771

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

I, Brennan T. Baker, 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>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Self-Employment	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Income from real property (such as rental income)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Gifts	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Alimony	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Child Support	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Disability (such as social security, insurance payments)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Unemployment payments	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Public-assistance (such as welfare)	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>

Other (specify): \_\_\_\_\_ \$ 0.00 \_\_\_\_\_ \$ 0.00 \_\_\_\_\_ \$ 0.00 \_\_\_\_\_ \$ 0.00

**Total Monthly Income:** \$ 0.00 \_\_\_\_\_ \$ 0.00 \_\_\_\_\_ \$ 0.00 \_\_\_\_\_ \$ 0.00

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
<u>None – Incarcerated</u>	_____	_____	\$ <u>00.00</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
<u>None – Not Married</u>	_____	_____	\$ <u>00.00</u>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

4. How much cash do you and your spouse have? \$ 00.00.  
Below, state any money you or your spouse has in bank accounts or in any other financial institution.

Financial Institution	Type of Account	Amount you have	Amount your spouse has
<u>None – Incarcerated</u>	<u>None</u>	\$ <u>00.00</u>	\$ <u>00.00</u>
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____

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

☐ Home Value \$ \_\_\_\_\_ ☐ Other real estate Value \$ \_\_\_\_\_

☐ Motor Vehicle 1  
Year/Make/Model: \_\_\_\_\_  
Value \$ \_\_\_\_\_

☐ Motor Vehicle 2  
Year/Make/Model: \_\_\_\_\_  
Value \$ \_\_\_\_\_

☐ Other Assets  
Description: \_\_\_\_\_  
Value \$ \_\_\_\_\_

☒ **NO ASSETS**

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>None - Incarcerated</u>	<u>\$ 00.00</u>	<u>\$ 00.00</u>
_____	<u>\$ _____</u>	<u>\$ _____</u>
_____	<u>\$ _____</u>	<u>\$ _____</u>

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

Name	Relationship	Age
<u>None - Incarcerated</u>	<u>None - Incarcerated</u>	<u>None - Incarcerated</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 rent for mobile home)	<u>\$ 00.00</u>	<u>\$Not married</u>

Are real estate taxes included? ☐ Yes ☒ No

Is property insurance included? ☐ Yes ☒ No

Utilities (electricity, heating fuel, water, sewer, and telephone)	<u>\$ 00.00</u>	<u>\$Not married</u>
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Home maintenance (repairs and upkeep)	\$ <u>00.00</u>	\$ <u>Not married</u>
Food	\$ <u>00.00</u>	\$ <u>Not married</u>
Clothing	\$ <u>00.00</u>	\$ <u>Not married</u>
Laundry and dry-cleaning	\$ <u>00.00</u>	\$ <u>Not married</u>
Medical and dental expenses	\$ <u>00.00</u>	\$ <u>Not married</u>
Transportation (not including motor vehicle payments)	\$ <u>00.00</u>	\$ <u>Not married</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>00.00</u>	\$ <u>Not married</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>00.00</u>	\$ <u>Not married</u>
Life	\$ <u>00.00</u>	\$ <u>Not married</u>
Health	\$ <u>00.00</u>	\$ <u>Not married</u>
Motor Vehicle	\$ <u>00.00</u>	\$ <u>Not married</u>
Other: _____	\$ <u>00.00</u>	\$ <u>Not married</u>
Taxes (not deducted from wages or included in mortgage payments)		
Specify: _____	\$ <u>00.00</u>	\$ <u>Not married</u>
Installment payments		
Motor Vehicle	\$ <u>00.00</u>	\$ <u>Not married</u>
Credit card(s)	\$ <u>00.00</u>	\$ <u>Not married</u>
Department store(s)	\$ <u>00.00</u>	\$ <u>Not married</u>
Other: _____	\$ <u>00.00</u>	\$ <u>Not married</u>
Alimony, maintenance, and support paid to others	\$ <u>00.00</u>	\$ <u>Not married</u>
	\$ <u>00.00</u>	\$ <u>Not married</u>
Regular expenses for operation of business, profession,		

or farm (attach detailed statement)

Other (specify): \_\_\_\_\_ \$ 00.00 \$ Not married

**Total monthly expenses:** \$ 00.00 \$ Not married

9. Do you expect any major changes to your monthly income or expenses 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 for the foreseeable future; I do not have any regular source of income; I am not employed by the institution; and I have no friends or family who deposit money onto my inmate account regularly.

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

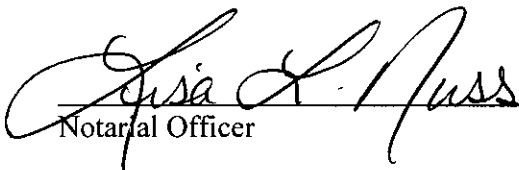
DATED this 21<sup>st</sup> day of December, 2022.



Brennan T. Baker, Petitioner, pro se  
WMCI #33896  
7076 Road 55F  
Torrington, WY 82240-7771

STATE OF WYOMING     )  
                                      ) SS:  
COUNTY OF GOSHEN    )

Subscribed and sworn to before me, a Notarial Officer, on this 21<sup>st</sup> day of December, 2022, by Brennan T. Baker.

  
Notarial Officer

My Commission Expires: May 30, 2028

