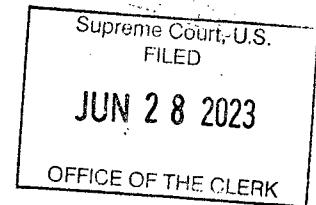


23-5231

IN THE  
SUPREME COURT OF THE UNITED STATES



NAVARRO MARTIN, MARIA — PETITIONER  
(Your Name)

VS.

STATE OF FLORIDA — 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):

IN THE NINTH JUDICIAL CIRCUIT COURT IN AND FOR ORANGE  
COUNTY FLORIDA, order rendered on August 02, 2021

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.

  
(Signature)

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

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

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

N/A

**Amount owed to you**

\$ N/A

**Amount owed to your spouse**

\$ N/A

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

**Name**

N/A

**Relationship**

N/A

**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

\$ N/A

Are real estate taxes included?  Yes  No  
Is property insurance included?  Yes  No

Utilities (electricity, heating fuel,  
water, sewer, and telephone)

\$ N/A

\$ N/A

Home maintenance (repairs and upkeep)

\$ N/A

\$ N/A

Food

\$ N/A

\$ N/A

Clothing

\$ N/A

\$ N/A

Laundry and dry-cleaning

\$ N/A

\$ N/A

Medical and dental expenses

\$ N/A

\$ N/A

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

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.

*The petitioner is actually incarcerated, without any access to the Trust Account, due to restriction of sending Money, only available to Inmate's family with an approved status to visitations.*

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

Executed on: 1 [redacted] May, 29, 20 23

  
(Signature)

IN THE CIRCUIT COURT OF THE  
NINTH JUDICIAL CIRCUIT IN AND  
FOR ORANGE COUNTY, FLORIDA

STATE OF FLORIDA,  
Plaintiff,  
vs.

MARIA NAVARRO MARTIN,  
Defendant.

CASE NO: 2017-CF-010498-A-O

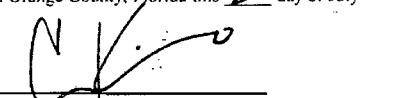
**ORDER TO PROCEED WITHOUT PAYMENT OF COSTS, DECLARING  
DEFENDANT INSOLVENT FOR PURPOSES OF APPEAL**

THIS CAUSE, having come on to be considered on the Defendant/Appellant's Motion to Proceed Without Payment of Costs, Declaring Defendant Insolvent for Purposes of Appeal, and it appearing that this Defendant/Appellant is an insolvent person, it is, upon consideration thereof,

**ORDERED AND ADJUDGED:**

1. Defendant/Appellant is hereby adjudged to be an insolvent person for the purposes of appeal.
2. The Regional Counsel's Office is hereby appointed for the purposes of appeal.
3. The Court Reporter is hereby directed to transcribe the proceedings in said cause as designated by Defendant/Appellant's Counsel unless otherwise ordered by this Court or the Appellate Court.
4. The cost of transcribing said proceedings and appeal of said Defendant/Appellant shall be borne by the Office of Criminal Conflict and Civil Regional Counsel.

DONE AND ORDERED in Chambers in Orange County, Florida this 2<sup>nd</sup> day of <sup>August</sup> 2021.

  
HONORABLE CHAD K. ALVARO  
Circuit Court Judge

cc: Regional Counsel's Office, rccappeals@rc5state.com  
Court Reporter, felonytrprtng@ocnjcc.org

IN THE CIRCUIT COURT OF THE  
NINTH JUDICIAL CIRCUIT IN AND  
FOR ORANGE COUNTY, FLORIDA

STATE OF FLORIDA,  
Plaintiff,  
vs.

MARIA NAVARRO MARTIN,  
Defendant.

CASE NO: 2017-CF-010498-A-O

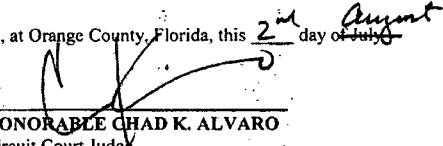
**ORDER FOR TRANSCRIPTION OF PROCEEDINGS**

THIS CAUSE having come on to be heard before me, and the Court being fully advised in the premises, it is

**ORDERED AND ADJUDGED** that the Defendant/Appellant's Motion for Transcription of Proceedings be and the same is hereby GRANTED and the following hearings are to be released to the Court Reporter and/or the Regional Counsel's Office for transcription purposes and the Court Reporter is directed to transcribe them for the Record on Appeal.

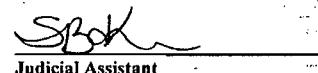
1. The Defendant's Evidentiary Hearing which transpired on July 8, 2021 before the Honorable Chad K. Alvaro.

DONE AND ORDERED in Chambers, at Orange County, Florida, this 2<sup>nd</sup> day of <sup>August</sup> 2021.

  
HONORABLE CHAD K. ALVARO  
Circuit Court Judge

**CERTIFICATE OF SERVICE**

I DO HEREBY CERTIFY that a true and correct copy of the foregoing has been delivered by email delivery to the Court Reporter, felonytrprtng@ocnjcc.org, Office of the State Attorney, Division17@sao9.org, Regional Counsel's Office, rccappeals@rc5state.com this 2<sup>nd</sup> day of July 2021.

  
Judicial Assistant

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2  
3  
IN THE CIRCUIT COURT OF THE  
NINTH JUDICIAL CIRCUIT, IN AND  
FOR ORANGE COUNTY, FLORIDA  
CRIMINAL JUSTICE DIVISION

4 STATE OF FLORIDA,

5 Plaintiff,

CASE NO.: 48-2017-CF-10498-A-O

6 vs.

DIVISION NO.: 17

7 MARIA NAVARRO-MARTIN,

8 Defendant.

9 MOTION FOR POST-CONVICTION RELIEF

10 BEFORE

11 THE HONORABLE CHAD K. ALVARO

12 Orange County Courthouse  
425 North Orange Avenue  
13 Orlando, Florida 32801  
Courtroom 6A  
14 July 8, 2021  
15 Stenographically reported

16 A P P E A R A N C E S :

17 MERRILYN E. HOENEMEYER, ESQUIRE  
Office of the Attorney General  
18 3507 East Frontage Road, Suite 325  
Tampa, Florida 33607  
19 On behalf of the State

20 AMY TESTA, ESQUIRE  
Office of the Attorney General  
21 135 West Central Boulevard, Suite 1000  
Orlando, Florida 32801  
22 On behalf of the State

23 DAVID VARET, ESQUIRE  
Office of Regional Conflict Counsel  
24 101 Sunnystown Road, Suite 310  
Casselberry, Florida 32707  
25 On behalf of the Defendant

Ninth Judicial Circuit  
Court Reporting Services

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IN D E X  
July 8, 2021

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Ninth Judicial Circuit  
Court Reporting Services