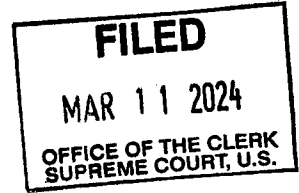


No.

23-7088

ORIGINAL



IN THE
SUPREME COURT OF THE UNITED STATES

BRIAN T. HILL — PETITIONER
(Your Name)

VS.

JOSIE GASTELO — 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):

UNITED STATES DISTRICT COURT, CENTRAL DISTRICT OF CALIFORNIA

☐ 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.

A handwritten signature in black ink, appearing to be "B. Hill", written over a horizontal line.

(Signature)

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

I, BRIAN T. HILL, 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"	\$ N/A	\$ "0"	\$ N/A
Self-employment	\$ "0"	\$	\$ "0"	\$
Income from real property (such as rental income)	\$ "0"	\$	\$ "0"	\$
Interest and dividends	\$ "0"	\$	\$ "0"	\$
Gifts	\$ "0"	\$	\$ "0"	\$
Alimony	\$ "0"	\$	\$ "0"	\$
Child Support	\$ "0"	\$	\$ "0"	\$
Retirement (such as social security, pensions, annuities, insurance)	\$ "0"	\$	\$ "0"	\$
Disability (such as social security, insurance payments)	\$ "0"	\$	\$ "0"	\$
Unemployment payments	\$ "0"	\$	\$ "0"	\$
Public-assistance (such as welfare)	\$ "0"	\$	\$ "0"	\$
Other (specify): <u>None</u>	\$ "0"	\$	\$ "0"	\$
Total monthly income:	\$ "0"	\$	\$ "0"	\$

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
state prison	P.O. Box	Aug. 24, 2021	\$ "0"
	686 Soledad,	through	\$ "0"
	CA. 93960	Feb 24 2024	\$ "0"

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			\$

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.

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
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 "0"

☐ Other real estate
Value "0"

☐ Motor Vehicle #1
Year, make & model
Value "0"

☐ Motor Vehicle #2
Year, make & model N/A
Value "0"

☐ Other assets
Description N/A
Value "0"

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
N/A	\$	\$
N/A	\$	\$
N/A	\$	\$

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").

Name	Relationship	Age
N/A		
N/A		
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) 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	\$ "0"	\$ N/A
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ "0"	\$ N/A
Home maintenance (repairs and upkeep)	\$ "0"	\$ N/A
Food	\$ "0"	\$ N/A
Clothing	\$ "0"	\$ N/A
Laundry and dry-cleaning	\$ "0"	\$ N/A
Medical and dental expenses	\$ "0"	\$ N/A

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

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 no source of income

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

Executed on: March 6, 2024



(Signature)

Case Number: _____

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of
the prisoner's trust account statement showing transactions of

BRIAN HILL H67149

for the last six months at

Correctional Training Facility,
P.O. Box 686, 5 Miles N of Soledad on US 101,
Soledad, California 93960

where (s)he is confined.

(name of institution)

I further certify that the average deposits each month to this
prisoner's account for the most recent 6-month period were: \$ \$0.01
and the average balance in the prisoner's account each month for
the most recent 6-month period was: \$0.19

Dated 3/11/2024

C. DAVIS

ACCOUNTANT I, (SPECIALIST)



THE FOLLOWING IS A TRUE
COPY OF THE TRUST ACCOUNT STATEMENT
BY THIS OFFICE
ATTEST: 3/11/2024

CALIFORNIA DEPARTMENT OF CORRECTIONS
BY C. Davis, Accountant I
TRUST SERVICES

Specialist

Institution: CTF

Inmate Statement Report

CDCR#	Inmate/Group Name	Institution	Unit	Cell/Bed
H67149	HILL, BRIAN	CTF	B WH B2	202202

Current Available Balance: \$0.20

Transaction List

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
09/01/2023	CTF	BEGINNING BALANCE				\$0.13
09/12/2023	CTF	INTEREST	8/23@3. 434PERANNUM		\$0.01	\$0.14
10/12/2023	CTF	INTEREST	9/23@3.534PER ANNUM		\$0.01	\$0.15
11/08/2023	CTF	INTEREST	10/23@3. 670PERANNUM		\$0.01	\$0.16
12/12/2023	CTF	INTEREST	11/23@3. 843PERRANNUM		\$0.01	\$0.17
01/09/2024	CTF	INTEREST	12/23@3. 929PERAMMUM		\$0.01	\$0.18
02/13/2024	CTF	INTEREST	1/24@4. 012PERAMMUM		\$0.01	\$0.19

Encumbrance List

Encumbrance Type	Transaction Date	Amount
No information was found for the given criteria.		

Obligation List

Obligation Type	Court Case#	Original Owed Balance	Sum of Tx for Date Range for Oblg	Current Balance
PLRA	CV 99-6808 AWI	\$105.00	\$0.00	\$0.18
FEDERAL FILING FEE	2:19CV08989-MWF-JC	\$350.00	\$0.00	\$179.53
FEDERAL FILING FEE	2:21-CV-03154-MWF-JC	\$350.00	\$0.00	\$319.38

Restitution List

Restitution	Court Case#	Status	Original Owed Balance	Interest Accrued	Sum of Tx for Date Range for Oblg	Current Balance
No information was found for the given criteria.						



THE FOLLOWING INSTRUMENT IS A TRUE
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE 3/11/2024
ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY C. Denise Aloumbert I.
TRUST OFFICE *Specialist*