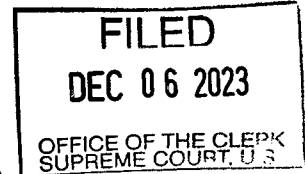


23-7320

No. _____

ORIGINAL



IN THE
SUPREME COURT OF THE UNITED STATES

DARAIN ESPINOSA — PETITIONER
(Your Name)

VS.

CONTRA COSTA COUNTY CA. — 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):

☐ 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.

Q. R. Z.
(Signature)

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

I, DARRIN ESPINOSA, 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>Ø</u>	\$ <u>N/A</u>	\$ <u>Ø</u>	\$ <u>N/A</u>
Self-employment	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Income from real property (such as rental income)	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Interest and dividends	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Gifts	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Alimony	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Child Support	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Disability (such as social security, insurance payments)	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Unemployment payments	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Public-assistance (such as welfare)	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Other (specify): <u> </u>	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </u>
Total monthly income:	\$ <u>Ø</u>	\$ <u> </u>	\$ <u>Ø</u>	\$ <u> </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	\$ 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	\$ 0
			\$
			\$

4. How much cash do you and your spouse have? \$ 6,107⁰⁰
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
CHECKING	\$ 6,107 ⁰⁰	\$ 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 187,000

☐ Other real estate
Value N/A

☒ Motor Vehicle #1 1982 CHEVY
Year, make & model EL CAMINO
Value 400⁰⁰

☐ Motor Vehicle #2 1997 CHEVY
Year, make & model TRUCK.
Value 1,200⁰⁰

☒ # 3 1979 BLAZER CHEVY 200⁰⁰

☒ Other assets
Description MOTORCYCLE 1996 DAYNA
Value 800⁰⁰

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
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)

\$ 1598⁰⁰

\$ N/A

Are real estate taxes included? ☒ Yes ☐ No

Is property insurance included? ☒ Yes ☐ No

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

\$ 671⁰⁰

\$ _____

Home maintenance (repairs and upkeep)

\$ 0

\$ _____

Food

\$ 272⁰⁰

\$ _____

Clothing

\$ 0

\$ _____

Laundry and dry-cleaning

\$ 0

\$ _____

Medical and dental expenses

\$ 0

\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ Ø	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ Ø	\$ <u> </u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ Ø	\$ <u> </u>
Life	\$ Ø	\$ <u> </u>
Health	\$ Ø	\$ <u> </u>
Motor Vehicle	\$ <u>96⁰⁰</u>	\$ <u> </u>
Other: <u>N/A</u>	\$ Ø	\$ <u> </u>
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>N/A</u>	\$ Ø	\$ <u> </u>
Installment payments		
Motor Vehicle	\$ Ø	\$ <u> </u>
Credit card(s)	\$ Ø	\$ <u> </u>
Department store(s)	\$ Ø	\$ <u> </u>
Other: <u>N/A</u>	\$ Ø	\$ <u> </u>
Alimony, maintenance, and support paid to others	\$ Ø	\$ <u> </u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ Ø	\$ <u> </u>
Other (specify): <u>N/A</u>	\$ Ø	\$ <u> </u>
Total monthly expenses:	\$ <u>2,637⁰⁰</u>	\$ <u> </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.

SEE ATTACHED

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? \$6,517⁰⁰

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

LAW OFFICES OF RICHARD N. KOSS
600 ALLERTON ST #202
REDWOOD CITY, CA 94063-1570

650.722.7046 (Phone) • 650.399.0004 (Fax)

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? _____

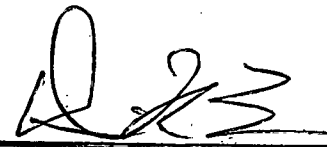
If yes, state the person's name, address, and telephone number:

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

SEE ATTACHED

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

Executed on: 4-23, 2024


(Signature)

Attachment Questions

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

Currently I have no offers of employment, but I am diligently looking for employment. I have applied for positions calling for my skillsets with all of my contiguous counties and to date have not received an offer of employment. I answered the question "Yes" because I continue to look for work that encompasses my skillsets. I own my own home, have a monthly mortgage payment and have no other notable assets.

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

As stated in question number nine, I currently do not have any income. I have been living on the settlement I received for the dog bite that cause my permanent and stationary disability. However, the settlement funds are nearing their end. I currently have enough to sustain my house payments for approximately another six months.

225

✓ Track Your Expenses...

<input type="checkbox"/> Auto/Travel	<input type="checkbox"/> Education	<input type="checkbox"/> Medical/Dental
<input type="checkbox"/> Business	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Savings
<input type="checkbox"/> Charities	<input type="checkbox"/> Food	<input type="checkbox"/> Taxes
<input type="checkbox"/> Clothing	<input type="checkbox"/> Home	<input type="checkbox"/> Utilities
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Insurance	<input type="checkbox"/> Other

4-26-21

BAL. FOR'D	
ITEM AMOUNT	3500
BALANCE	
DEPOSIT	
FOR'D	

LAW OFFICES OF RICHARD D. KESS

THREE THOUSAND FIVE HUNDRED / 100

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☐ TAX DEDUCTIBLE ITEM

Memo # 210

NOT NEGOTIABLE

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229

✓ Track Your Expenses...

<input type="checkbox"/> Auto/Travel	<input type="checkbox"/> Education	<input type="checkbox"/> Medical/Dental
<input type="checkbox"/> Business	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Savings
<input type="checkbox"/> Charities	<input type="checkbox"/> Food	<input type="checkbox"/> Taxes
<input type="checkbox"/> Clothing	<input type="checkbox"/> Home	<input type="checkbox"/> Utilities
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Insurance	<input type="checkbox"/> Other

5-25-21

BAL. FOR'D	
ITEM AMOUNT	1312
BALANCE	
DEPOSIT	
FOR'D	

LAW OFFICES OF RICHARD D. KESS

ONE THOUSAND THREE HUNDRED TWELVE / 100

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☐ TAX DEDUCTIBLE ITEM

Memo # 207

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233

✓ Track Your Expenses...

<input type="checkbox"/> Auto/Travel	<input type="checkbox"/> Education	<input type="checkbox"/> Medical/Dental
<input type="checkbox"/> Business	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Savings
<input type="checkbox"/> Charities	<input type="checkbox"/> Food	<input type="checkbox"/> Taxes
<input type="checkbox"/> Clothing	<input type="checkbox"/> Home	<input type="checkbox"/> Utilities
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Insurance	<input type="checkbox"/> Other

6-6-21

BAL. FOR'D	
ITEM AMOUNT	143
BALANCE	
DEPOSIT	
FOR'D	

LAW OFFICES OF RICHARD D. KESS

ONE HUNDRED FORTY THREE / 100

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☐ TAX DEDUCTIBLE ITEM

Memo # 212

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254

✓ Track Your Expenses...

<input type="checkbox"/> Auto/Travel	<input type="checkbox"/> Education	<input type="checkbox"/> Medical/Dental
<input type="checkbox"/> Business	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Savings
<input type="checkbox"/> Charities	<input type="checkbox"/> Food	<input type="checkbox"/> Taxes
<input type="checkbox"/> Clothing	<input type="checkbox"/> Home	<input type="checkbox"/> Utilities
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Insurance	<input type="checkbox"/> Other

BAL. FOR'D	
ITEM AMOUNT	
BALANCE	
DEPOSIT	
FOR'D	

Check J. D. [unclear]

Full Amount Paid [unclear]

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☐ TAX DEDUCTIBLE ITEM

Memo 1100 1000 32W

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255

✓ Track Your Expenses...

<input type="checkbox"/> Auto/Travel	<input type="checkbox"/> Education	<input type="checkbox"/> Medical/Dental
<input type="checkbox"/> Business	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Savings
<input type="checkbox"/> Charities	<input type="checkbox"/> Food	<input type="checkbox"/> Taxes
<input type="checkbox"/> Clothing	<input type="checkbox"/> Home	<input type="checkbox"/> Utilities
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Insurance	<input type="checkbox"/> Other

BAL. FOR'D	
ITEM AMOUNT	
BALANCE	
DEPOSIT	
FOR'D	

Law Firm [unclear]

32W [unclear]

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☐ TAX DEDUCTIBLE ITEM

Memo [unclear]

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NOT NEGOTIABLE

224

✓ Track Your Expenses...

<input type="checkbox"/> Auto/Travel	<input type="checkbox"/> Education	<input type="checkbox"/> Medical/Dental
<input type="checkbox"/> Business	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Savings
<input type="checkbox"/> Charities	<input type="checkbox"/> Food	<input type="checkbox"/> Taxes
<input type="checkbox"/> Clothing	<input type="checkbox"/> Home	<input type="checkbox"/> Utilities
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Insurance	<input type="checkbox"/> Other

BAL. FOR'D	
ITEM AMOUNT	
BALANCE	
DEPOSIT	
FOR'D	

Law Firm [unclear]

4-12-21

the other [unclear]

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☐ TAX DEDUCTIBLE ITEM

Memo H 200

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NOT NEGOTIABLE