

No. _____

In the Supreme Court of the United States

CHRISTOPHER L. WILSON,

Petitioner,

v.

STATE OF HAWAII,

Respondent.

ON PETITION FOR A WRIT OF CERTIORARI

TO THE HAWAII SUPREME COURT

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

JON N. IKENAGA

BENJAMIN E. LOWENTHAL

Counsel of Record

SARA K. HALEY

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Counsel for Petitioner

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The Petitioner moves to proceed *in forma pauperis* pursuant to Rule 30 of the rules of this Court. The Petitioner has been determined indigent pursuant to Hawai'i Revised Statutes §§ 802-1 and 802-4 and has been represented by the Office of the Public Defender in the Circuit Court of the Second Circuit, Maui County, Hawai'i, the Intermediate Court of Appeals, and the Hawai'i Supreme Court. The undersigned counsel is a deputy public defender assigned to represent the Petitioner. Counsel is unaware of any changes in the Petitioner's status that would affect the determination of his indigency. The Petitioner also submits the attached affidavit in support of this motion.

Dated: May 14, 2024.

Respectfully submitted,

JON N. IKENAGA
State of Hawai'i Public Defender

A handwritten signature in black ink, appearing to read 'Ben Lowenthal', is written over a horizontal line.

BENJAMIN E. LOWENTHAL
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**AFFIDAVIT OR DECLARATION
IN SUPPORT OF MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

I, Christopher Wilson, 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>4214.00</u>	\$ <u>2815.00</u>	\$ <u>Ø</u>	\$ <u>2815.00</u>
Self-employment	\$ _____	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ _____	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ _____	\$ _____	\$ _____	\$ _____
Gifts	\$ _____	\$ _____	\$ _____	\$ _____
Alimony	\$ _____	\$ _____	\$ _____	\$ _____
Child Support	\$ _____	\$ _____	\$ _____	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ _____	\$ _____	\$ _____	\$ _____
Disability (such as social security, insurance payments)	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment payments	\$ _____	\$ _____	\$ _____	\$ _____
Public-assistance (such as welfare)	\$ _____	\$ _____	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____	\$ _____	\$ _____
Total monthly income:	\$ <u>4214.00</u>	\$ <u>2815.00</u>	\$ <u>Ø</u>	\$ <u>2815.00</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>290.00</u>	\$ <u>190.00</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ _____	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ <u>400.00</u>	\$ _____
Health	\$ _____	\$ _____
Motor Vehicle	\$ <u>131.00</u>	\$ <u>55.00</u>
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ _____	\$ _____
Credit card(s)	\$ <u>400.00</u>	\$ <u>300.00</u>
Department store(s)	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____
Total monthly expenses:	\$ <u>2877.00</u>	\$ <u>2290.00</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
Wolfgang Steakhouse	3750 Alameda Dr	2/24 - 4/24	\$ 6,250.00
Mani Country Club	48 Nonohe Pl	8/21 - 2/24	\$ 4,642.00

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
Mrs Gooches	550 Bowie St Austin TX 78703	2015 - Present	\$ 2,992.00

4. How much cash do you and your spouse have? \$ _____
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	\$ 171.00	\$ 500.00
Checking	\$ 1,000.00	\$ 1,000.00
Savings	\$	\$

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 2010 Mercedes E550
Value \$ 6566.00

☒ Motor Vehicle #2
Year, make & model 2010 Mercedes E550
Value \$ 6,699.00

☐ Other assets
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
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

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
_____	_____	_____
_____	_____	_____
_____	_____	_____

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)	\$ <u>750.00</u>	\$ <u>750.00</u>
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)	\$ _____	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ <u>800.00</u>	\$ <u>800.00</u>
Clothing	\$ <u>66.00</u>	\$ <u>20.00</u>
Laundry and dry-cleaning	\$ _____	\$ <u>160.00</u>
Medical and dental expenses	\$ <u>40.00</u>	\$ <u>15.00</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 declare under penalty of perjury that the foregoing is true and correct.

Executed on: April 17 18, 2024

DS
W


(Signature)

Christopher Wilson

Affidavit Forma Pauperis Question 9 Explanation.

Do I expect any major changes to my monthly income or expenses or in your assets or liabilities during the next 12 months?

I answered: **YES.**

As of April 9, 2024 I was terminated from my employment at Wolfgang Steakhouse Maui.

I have not as of yet claimed unemployment or found new employment. So income is sure to change in coming months.

For verification of my termination with Wolfgang Maui please contact:

**Wolfgang Steakhouse Maui,
Human Resources Director**

Shinelle Baker
150 Kaiulani Ave.
Honolulu, HI. 96815
shinelle@wdiusa.com
(774)563-8744

State of Hawaii

} S.S.

County of Maui

On this 18th day of April, 2024

Before me personally appeared

Christopher Wilson

Name of signer

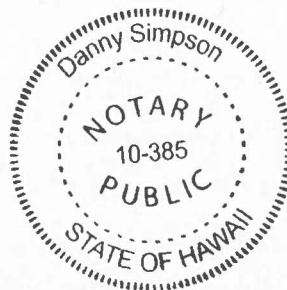
and

Name of signer

Subscribed and sworn (or affirmed) to before me on this 18th day of April, 2024

Notary Signature

Danny Simpson
Commission expires 11/14/2026



Certification

Document date: April 18, 2024

#pages: 7

Notary name: Danny Simpson

2nd Circuit

Document description: Affidavit or Declaration in Support of Motion
for Leave to Proceed in Forma Pauperis

Notary Signature: Danny Simpson

Date: April 18, 2024

Danny Simpson
Commission expires 11/14/2026

