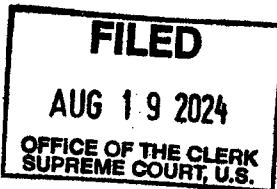


No. 24-6433

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES



Jesus C. Gonzalez — PETITIONER
(Your Name)

VS.

Jason Benzel — 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):

Wisconsin Court of Appeals

Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

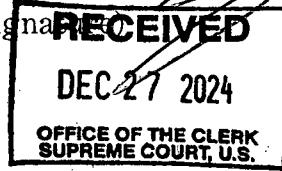
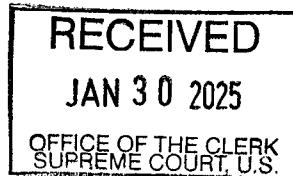
Petitioner's affidavit or declaration in support of this motion is attached hereto.

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, Jesus L. Gonzalez, 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>56.00</u>	\$ _____	\$ <u>56.00</u>	\$ _____
Self-employment	\$ _____	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ _____	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ <u>3.00</u>	\$ _____	\$ <u>3.00</u>	\$ _____
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): <u>Hobby Sales</u>	\$ <u>250.00</u>	\$ _____	\$ <u>0.00</u>	\$ _____
Total monthly income:	\$ <u>309.00</u>	\$ _____	\$ <u>59.00</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
<u>Dodge Corr. Inst.</u>	<u>1. W. Lincoln Ave.</u>	<u>Feb. 2012 to Present</u>	<u>\$ 56.00</u>
			<u>\$</u>
			<u>\$</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>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
			<u>\$</u>
			<u>\$</u>

4. How much cash do you and your spouse have? \$ 0.00

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
<u>Inmate Regular Account</u>	<u>\$ 2,734.24</u>	<u>\$</u>
<u>Inmate Release Account</u>	<u>\$ 3,148.91</u>	<u>\$</u>
	<u>\$</u>	<u>\$</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 _____

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>IRS</u>	<u>\$1,200 + 66.77</u>	<u>\$</u> _____
_____	<u>\$</u> _____	<u>\$</u> _____
_____	<u>\$</u> _____	<u>\$</u> _____

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
<u>N/A</u>	<u>N/A</u>	<u>N/A</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 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		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>4.00</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ <u>230.00</u>	\$ _____
Clothing	\$ <u>17.00</u>	\$ _____
Laundry and dry-cleaning	\$ _____	\$ _____
Medical and dental expenses	\$ <u>2.00</u>	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ _____	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>70.00</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ _____	\$ _____
Health	\$ _____	\$ _____
Motor Vehicle	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ _____	\$ _____
Credit card(s)	\$ _____	\$ _____
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>\$ 293.00</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.

My 2 year term of employment will expire so I will be making less than \$6.00/Month. No need for 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.

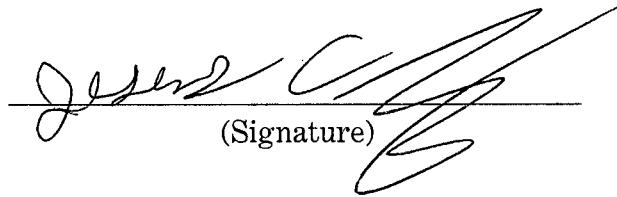
The Inmate Release Account, which took 14 years to accrue is not accessible to me until my release. The printing of Booklets for the court is beyond my capacity or means.

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

Executed on: Tuesday, December 10, 2024

Subscribed and sworn to before me
on 12/10/2024

Notary Public State of Wisconsin
My commission expires 02/10/2028


(Signature)



Diane M. Fremgen
Acting Clerk

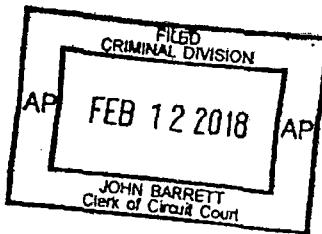
WISCONSIN COURT OF APPEALS
OFFICE OF THE CLERK

110 E. Main Street, Suite 215
P.O. Box 1688
Madison, WI 53701-1688

Telephone: 608-266-1880
TTY: 800-947-3525
Fax: 608-267-0640
<http://www.wicourts.gov>

To:

Karen A. Loebel
Asst. District Attorney
821 W. State St.
Milwaukee, WI 53233



Criminal Appeals Unit
Department of Justice
P.O. Box 7857
Madison, WI 53707-7857

Jesus Gonzalez #580519
Dodge Corr. Inst.
P.O. Box 700
Waupun, WI 53963-0700

John Barrett
Clerk of Circuit Court ✓
Room 114
821 W. State Street
Milwaukee, WI 53233

The court has entered the following order:

District: 1
Appeal No. 2018AP000257
State v. Jesus Gonzalez

February 9, 2018

Circuit Court Case No. 2010CF002323

A petition for waiver of fees has been filed in the above matter. The petition establishes indigency for purposes of prosecuting this action.

IT IS ORDERED that the court grants permission to proceed without payment of the filing fee. This order waives only the filing fees in the Court of Appeals. It is not a determination of indigency for any other purpose. Indigency may be reevaluated if a request is received for waiver of other fees based on indigency.

Diane M. Fremgen
Acting Clerk of Court of Appeals

**INTERVIEW/INFORMATION REQUEST
SOLICITUD PARA INFORMACION / ENTREVISTA**

Instruction to Inmate: Do not use this form to contact health staff. Use a Health, Dental or Psychological Service Request.

Instrucciones para Reclusos: No utilice este formulario para comunicarse con el personal de cuidados de salud. Utilice una solicitud de servicio de cuidados de salud, dentales o psicológicos.

OFFENDER NAME

NOMBRE DEL/LA OFENSOR(A)

Jesus C Gonzalez

DOC NUMBER

NUMERO DEL/LA OFENSOR(A)

LIVING UNIT

UNIDAD DE VIVIENDA

13

DATE

FECHA

9-16-24

WORK ASSIGNMENT

ASIGNACION DE TRABAJO

Chapel Clerk

Interview Entrevista

Information Informacion

STATE REASON FOR INTERVIEW OR SPECIFY INFORMATION REQUESTED

INDIQUE LA RAZON PARA LA ENTREVISTA O ESPECIFIQUE LA INFORMACION QUE SOLICITA

May I please have all my files, briefs to Supreme Court and all decisions made in my case electronically reformatted to fit onto 6 1/8 in by 9 1/4 in 60lb paper properly typeset at size 12 in Century family font?

Can they then be printed and bound into booklets in the Library?

I need a written answer to both questions for the Supreme Court of US.

(Do Not Write Below This Line) (No Escriba Debajo Esta Linea)

DISPOSITION OF REQUEST DISPOSICION DE LA SOLICITUD

You Will Be Interviewed
Usted sera entrevistado
 Information to Follow
Informacion Sera Proveida
 Request Referred To:
Solicitud Referida A:

Date: _____ Time: _____
Fecha: _____ Hora: _____

Information/Comment:
Informacion/Comentario:

We cannot do this

In the DCI Law Library

Signed Firmado

Department Departamento



TO: JESUS C Gonzalez
A: _____
NUMBER: 580519
NUMERO: _____
UNIT: 13
UNIDAD de VIVIENDA: _____
DATE: 9-16-2024
FECHA: _____

FOLD DOBLE

DESCARGO DE RESPONSABILIDAD (Disclaimer)

Esta es una traducción de un documento escrito en inglés, distribuido como una cortesía a las personas que no pueden leer inglés. Si resulta alguna diferencia o algún malentendido con esta traducción, el único documento reconocido será la versión en inglés.

This document contains translations of the English-language on this document provided as a courtesy to those not fluent in English. If differences or any misunderstandings occur, the document of record shall be the related English-language on this document.

FOLD DOBLE

DEPARTMENT OF CORRECTIONS
Division of Adult Institutions
DOC-0643 (Rev. 4/2015)

WISCONSIN

INTERVIEW/INFORMATION REQUEST
SOLICITUD POR INFORMACION/ENTREVISTA

TO: Library / Law library Librarian
A: _____
DEPARTMENT: Library / Law Library
DEPARTAMENTO: Library / Law Library
DATE: 9-16-2024
FECHA: _____

For Confidentiality Use Either Staple/Scotch Tape or an Envelope
Por Confidencialidad Engrapse o use Cinta Scotch o un Sobre

FILED

01-03-2020

John Barrett

Clerk of Circuit Court

2010CF002323

STATE OF WISCONSIN

Plaintiff,

v.

Case No. 10-CF-2323

Jesus Gonzalez

Defendant.

STATE PUBLIC DEFENDER - ORDER APPOINTING COUNSEL

Name:	Jesus Gonzalez	SPD Case No:	204000144Z
DOC #:	580519	SPD File No:	20P-40-A-F00144
Date of Birth:	12/16/1986	Case Group #:	2508296

Nature of Case: 940.02(1) 1st Degree Reckless Homicide FB 1 Cnts:
 941.30(2) 2nd Degree Recklessly Endangering Safety FE 1 Cnts:

Other Information

Judge: Wall R. Joseph
 Record Created: January 3, 2020
 Judgment Entered:
 Type: Collateral Review: Wis. Stat. sec. 974.06

In accordance with Chapter 977 of the Wisconsin statutes, I hereby appoint the following attorney to represent the above named individual in relation to the above entitled proceedings.

Attorney's Name:	John Wasielewski	State Bar No:	1009118
Address:	1429 N Prospect Ave Ste 211 Milwaukee, WI 53202 3042	Attorney Telephone:	(414) 278-7776
Attorney Email Address:	jwasielewski@milwpc.com	Attorney Fax Number:	() -
Appointed By:	Joseph N. Ehmann	Date Appointed:	January 3, 2020
SPD Office Handling:	Madison	Supervisor ID:	1016411
Dated:		SPD Office Phone:	(608) 266 3440

January 03, 2020

Office of the State Public Defender - Notice to Clients - File Retention Policy

When an attorney represents an individual, s/he makes and keeps a file of the documents and work done on the case. Attorneys on staff with the Office of the State Public Defender (SPD) create and maintain such files for each case. This notice applies only to cases handled by staff attorneys of the Office of the State Public Defender. If your case has been assigned to a private attorney, please consult that attorney about his or her file retention policy.

Upon the conclusion of the representation in this case, the SPD will, upon your request, deliver the original file or any portion requested, to you, along with any of your original documents or other property that the SPD has in its possession.

If you do not request your file, the SPD will retain it for a period of at least five years after the matter is closed. At any point during this period, you may request delivery of the file. If you do not request the file before the end of the five-year period, the SPD may, in its discretion, destroy the file and its contents without further notice to you.