

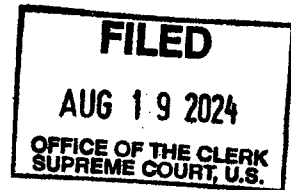
No.

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.

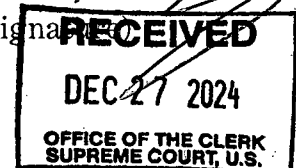
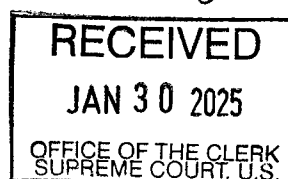
☒ Petitioner's affidavit or declaration in support of this motion is attached hereto.

☐ 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.

Jesus C. Gonzalez  
(Signature)



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

I, Jesus C. 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.<sup>00</sup></u>	\$ _____	\$ <u>56.<sup>00</sup></u>	\$ _____
Self-employment	\$ _____	\$ _____	\$ _____	\$ _____
Income from real property (such as rental income)	\$ _____	\$ _____	\$ _____	\$ _____
Interest and dividends	\$ <u>3.<sup>00</sup></u>	\$ _____	\$ <u>3.<sup>00</sup></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.<sup>00</sup></u>	\$ _____	\$ <u>0.<sup>00</sup></u>	\$ _____
<b>Total monthly income:</b>	\$ <u>309.<sup>00</sup></u>	\$ _____	\$ <u>59.<sup>00</sup></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.<sup>00</sup></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>
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

4. How much cash do you and your spouse have? \$ 0.<sup>00</sup>  
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.<sup>00</sup> Interest</u>	<u>\$</u>
<u></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>
<u></u>	<u></u>	<u></u>
<u></u>	<u></u>	<u></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)	<u>\$</u>	<u>\$</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)	<u>\$ 4.<sup>00</sup></u>	<u>\$</u>
Home maintenance (repairs and upkeep)	<u>\$</u>	<u>\$</u>
Food	<u>\$ 230.<sup>00</sup></u>	<u>\$</u>
Clothing	<u>\$ 17.<sup>00</sup></u>	<u>\$</u>
Laundry and dry-cleaning	<u>\$</u>	<u>\$</u>
Medical and dental expenses	<u>\$ 2.<sup>00</sup></u>	<u>\$</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ _____	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>40.<sup>00</sup></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): _____	\$ _____	\$ _____
<b>Total monthly expenses:</b>	\$ <u>293.<sup>00</sup></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 elapse so I will be making less than 56.<sup>00</sup>/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  
[Signature]

Notary Public State of Wisconsin

My commission expires

02/10/2025

[Signature]  
(Signature)



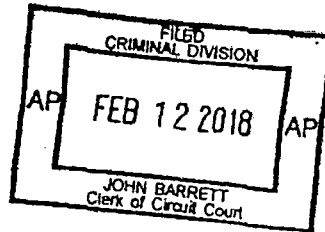
Diane M. Fremgen  
Acting Clerk

**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**

February 9, 2018

**Circuit Court Case No. 2010CF002323**

State v. Jesus Gonzalez

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)	DOC NUMBER NUMERO DEL/LA OFENSOR(A)	LIVING UNIT UNIDAD DE VIVIENDA
Jesus C Gonzalez	580519	13
DATE FECHA	WORK ASSIGNMENT ASIGNACION DE TRABAJO	
9-16-24	Chapel Clerk	
<input checked="" type="checkbox"/> Interview Entrevista <input checked="" type="checkbox"/> 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 reformat to fit onto 6 1/8 in x 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

<input type="checkbox"/> You Will Be Interviewed Usted sera entrevistado	Date: _____ Fecha: _____	Time: _____ Hora: _____
<input type="checkbox"/> Information to Follow Informacion Sera Proveida		
<input type="checkbox"/> Request Referred To: Solicitud Refereida A:		

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: \_\_\_\_\_  
DEPARTAMENTO: Library / Law Library  
DATE: \_\_\_\_\_  
FECHA: 9-16-2024

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

STATE OF WISCONSIN

Circuit Court BR. 20, Rm 502 Milwaukee

FILED

For Official Use

STATE OF WISCONSIN

Plaintiff,

v.

Case No. 10-CF-2323

Jesus Gonzalez

Defendant.

01-03-2020

John Barrett

Clerk of Circuit Court

2010CF002323

## 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 Fax Number:	() -
Attorney Email Address:	jwasielewski@milwpc.com	Date Appointed:	January 3, 2020
Appointed By:	Joseph N. Ehmann	Supervisor ID:	1016411
SPD Office Handling:	Madison	SPD Office Phone:	(608) 266 3440
Dated:	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.