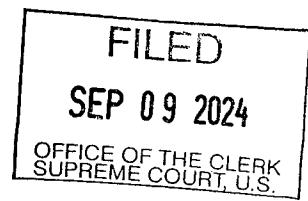


17

No. 24-6563



IN THE
SUPREME COURT OF THE UNITED STATES

ARTHUR TORLUCCI PETITIONER
(Your Name)

VS.
The State of California RESPONDENT(S) et al.
REAL PARTYS - Los Angeles County Court Central CSP/CJC Rm/04 at LA. Cnty D.A. office
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):

LA County Superior Court, Appellate Court
DIST 2 DIV 2 Ct. Supreme Ct. USDC Central 9th Cir. Appellate Ct.
AND IN THIS U.S. Supreme Court. & F.D.R. Warden's & D.O.C.

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

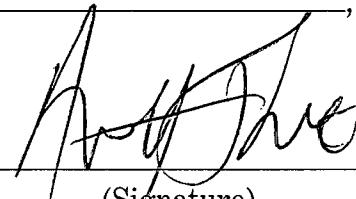
Petitioner's affidavit or declaration in support of this motion is attached hereto.

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

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.)

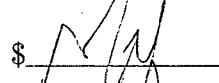
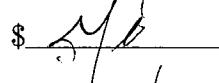
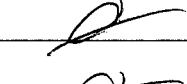
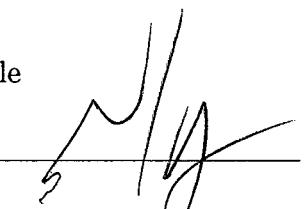
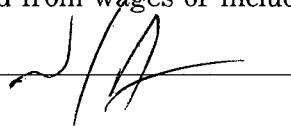
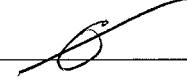
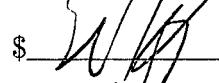
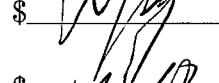
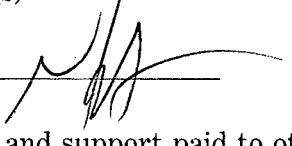
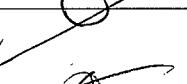
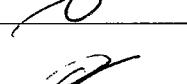
Employer	Address	Dates of Employment	Gross monthly pay
WHA	WHA	WHA	\$ \$ \$

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
CDCR SISP TRUST Account	\$ \$ \$	\$ \$ \$

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

<input type="checkbox"/> Home Value	<input type="checkbox"/> Other real estate Value
<input type="checkbox"/> Motor Vehicle #1 Year, make & model	<input type="checkbox"/> Motor Vehicle #2 Year, make & model
Value	Value
<input type="checkbox"/> Other assets Description	
Value	

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 	\$ 
Recreation, entertainment, newspapers, magazines, etc.	\$ 	\$ 
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	\$ 	\$ 

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? N/A

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? N/A

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 been in prison 28 years without
A opportunity to get a job. Kidnapped by Police &
Fraud For a murder that I did not commit. I did in a
sting, trying to kill

I declare under penalty of perjury that the foregoing is true and correct.
Executed on: September 3rd, 2014

(Signature)

Victor St. John Acting For
10 Years In NYC via NJ-
Doing my own legal work in
a cement cell at age 64 for 28 years

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
COCR # K33910
statement showing transactions of Torlucci, Arthur for the last six months at
(Prisoner's Name)
SALINAS VALLEY STATE PRISON
(Name of Institution), where (s)he is confined.

I further certify that the average deposits each month to this prisoner's account for the most recent six-month period were \$ 0 and the average balance in the prisoner's account each month for the most recent six-month period was \$ 0.

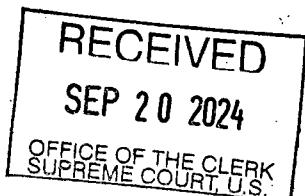
Date: 9/9/2024

Officer Name: M. Adame

Signature: M. Adame

Authorized Officer of the Institution

SALINAS VALLEY STATE PRISON
ACCOUNTING DEPARTMENT
P.O. BOX 1020
SOLEDAD, CA 93960-1020



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.

ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS
BY M. Adame
TRUST OFFICE



Date\Time: 9/9/2024 10:13:20 AM

Institution: SVSP

CDCR

Verified: _____

Inmate Statement Report

Start Date:	3/1/2024	Revalidation Cycle:	All
End Date:	8/31/2024	Housing Unit:	All
Inmate/Group#: K33910			

THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.

ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY M. Adams
TRUST OFFICE



Inmate Statement Report

CDCR#	Inmate/Group Name	Institution	Unit	Cell/Bed
K33910	TORLUCCI, ARTHUR	SVSP	D 008 2	221001
Current Available Balance:		\$0.00		



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE. 9/9/24
ATTEST: CALIFORNIA DEPARTMENT OF CORRECTIONS
BY M. Salas
TRUST OFFICE

Transaction List

Transaction Date	Institution	Transaction Type	Source Doc#	Receipt#/Check#	Amount	Account Balance
------------------	-------------	------------------	-------------	-----------------	--------	-----------------

No information was found for the given criteria.

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 Oblig	Current Balance
COPY CHARGES	CDC 119	\$2.30	\$0.00	\$1.05
COPY CHARGES	CDC 119	\$0.60	\$0.00	\$0.60
COPY CHARGES	CDC 119 10/30/08	\$0.20	\$0.00	\$0.20
COPY CHARGES	CDC 119	\$0.70	\$0.00	\$0.70
PLRA	CVO8-04124 SBA	\$350.00	\$0.00	\$333.70
COPY CHARGES	CDC 119 07/28/08	\$1.70	\$0.00	\$1.70
COPY CHARGES	COPY 04/16/09	\$1.30	\$0.00	\$1.30
COPY CHARGES	CDC 119 6/12/09	\$0.20	\$0.00	\$0.20
REGULAR MAIL	MAIL10/24/11ENT11/4	\$9.18	\$0.00	\$9.18
PLRA	11-17738	\$455.00	\$0.00	\$454.00
REGULAR MAIL	MAIL10/1/12E1/8/13	\$0.65	\$0.00	\$0.65
COPY CHARGES	COPY5/6/13 ENT5/28	\$50.00	\$0.00	\$50.00
PLRA	13-16338	\$455.00	\$0.00	\$455.00
COPY CHARGES	COPY10/14/13ENT10/15	\$0.10	\$0.00	\$0.10
PLRA	CV-1554-DAD	\$350.00	\$0.00	\$350.00
COPY CHARGES	01/19/16RC 12/22/16	\$0.10	\$0.00	\$0.10
COPY CHARGES	3/21/17COPIES3/9/17	\$0.10	\$0.00	\$0.10
COPY CHARGES	6/7/17COPIES5/31/17	\$0.10	\$0.00	\$0.10
DAMAGES - STATE PROPERTY	DAMAGED - RADIO	\$38.99	\$0.00	\$38.99
COPY CHARGES	REG COPY 3/1/18	\$3.50	\$0.00	\$3.50
REGULAR MAIL	MAIL7/28/19E8/1/19	\$10.85	\$0.00	\$10.85
COPY CHARGES	COPY121319ENT122419	\$12.50	\$0.00	\$12.50
REGULAR MAIL	POSTAGE 3/13	\$1.20	\$0.00	\$1.20
REGULAR MAIL	POSTAGE 3/13	\$1.20	\$0.00	\$1.20

Inmate Statement Report

Obligation Type	Court Case#	Original Owed Balance	Sum of Tx for Date Range for Oblig	Current Balance
COPY CHARGES	CDC119 03/11/22	\$0.50	\$0.00	\$0.50
COPY CHARGES	STATEMENT 5/4/22	\$0.30	\$0.00	\$0.09
COPY CHARGES	CDC 119 05/09/22	\$0.30	\$0.00	\$0.30
COPY CHARGES	CDC 119 06/10/22	\$0.40	\$0.00	\$0.40
COPY CHARGES	STATEMENT 6/16/22	\$0.40	\$0.00	\$0.40
COPY CHARGES	STATEMENT 7/18/22	\$0.60	\$0.00	\$0.60
REGULAR MAIL	POST 7/18/22	\$0.60	\$0.00	\$0.60
REGULAR MAIL	POST 7/18/22	\$0.58	\$0.00	\$0.58
COPY CHARGES	CDC 119 7/28/22	\$1.20	\$0.00	\$1.20
COPY CHARGES	STATEMENT 8/9/22	\$0.10	\$0.00	\$0.10
COPY CHARGES	CDC 119 9/14/22	\$0.30	\$0.00	\$0.30
COPY CHARGES	STATEMENT 10/10/22	\$0.10	\$0.00	\$0.10
COPY CHARGES	CDC 119 10/10/22	\$5.40	\$0.00	\$5.40
COPY CHARGES	CDC 119 10/11/22	\$0.30	\$0.00	\$0.30
COPY CHARGES	CDC 119 10/17/22	\$0.10	\$0.00	\$0.10
COPY CHARGES	CDC 119 11/15/22	\$0.30	\$0.00	\$0.30
COPY CHARGES	CDC 119 2/3/23	\$0.20	\$0.00	\$0.20
COPY CHARGES	STATEMENT 2/3/23	\$0.20	\$0.00	\$0.20
COPY CHARGES	CDC 119 2/13/23	\$0.30	\$0.00	\$0.30
COPY CHARGES	CDC 119 3/6/23	\$2.60	\$0.00	\$1.90
COPY CHARGES	CDC 119 5/9/23	\$0.40	\$0.00	\$0.40
COPY CHARGES	STATEMENT 5/9/23	\$0.10	\$0.00	\$0.10
COPY CHARGES	STATEMENT 5/23/23	\$0.10	\$0.00	\$0.10
COPY CHARGES	STATEMENT 6/13/23	\$0.10	\$0.00	\$0.10
COPY CHARGES	CDC 119 6/19/23	\$0.30	\$0.00	\$0.30
COPY CHARGES	STATEMENT 8/16/23	\$0.30	\$0.00	\$0.17
COPY CHARGES	CDC 119 9/11/23	\$0.40	\$0.00	\$0.40
COPY CHARGES	STATEMENT 9/25/23	\$0.10	\$0.00	\$0.10
COPY CHARGES	CDC 119 10/6/23	\$0.60	\$0.00	\$0.60
COPY CHARGES	STATEMENT 10/6/23	\$0.10	\$0.00	\$0.10
COPY CHARGES	CDC 119 10/23/23	\$0.10	\$0.00	\$0.10
COPY CHARGES	STATEMENT 12/18/23	\$0.20	\$0.00	\$0.10
COPY CHARGES	CDC 119 12/18/23	\$0.40	\$0.00	\$0.40
COPY CHARGES	STATEMENT 1/10/24	\$0.20	\$0.00	\$0.20
COPY CHARGES	CDC 119 1/10/24	\$0.40	\$0.00	\$0.40
COPY CHARGES	CDC 119 2/8/24	\$0.40	\$0.00	\$0.40
COPY CHARGES	CDC 119 2/8/24	\$0.30	\$0.00	\$0.30
COPY CHARGES	STATEMENT 2/8/24	\$0.20	\$0.00	\$0.20
COPY CHARGES	CDC 119 3/12/24	\$1.50	\$0.00	\$1.50
COPY CHARGES	CDC 119 4/4/24	\$0.10	\$0.00	\$0.10

Date\Time: 9/9/2024 10:13:20 AM

CDCR

Verified: _____

Institution: SVSP

Inmate Statement Report

Obligation Type	Court Case#	Original Owed Balance	Sum of Tx for Date Range for Oblig	Current Balance
COPY CHARGES	CDC 119 4/21/24	\$0.30	\$0.00	\$0.30
COPY CHARGES	STATEMENT 4/23/24	\$0.30	\$0.00	\$0.30
COPY CHARGES	CDC 119 5/25/24	\$0.20	\$0.00	\$0.20
COPY CHARGES	STATEMENT 6/19/24	\$0.20	\$0.00	\$0.20
COPY CHARGES	CDC 119 6/24/24	\$0.20	\$0.00	\$0.20
COPY CHARGES	STATEMENT 7/15/24	\$0.20	\$0.00	\$0.20
COPY CHARGES	CDC 119 7/15/24	\$0.30	\$0.00	\$0.30
COPY CHARGES	STATEMENT 8/12/24	\$0.20	\$0.00	\$0.20
COPY CHARGES	CDC 119 8/12/24	\$0.30	\$0.00	\$0.30
COPY CHARGES	CDC 119 8/12/24	\$0.10	\$0.00	\$0.10
COPY CHARGES	STATEMENT 8/19/24	\$0.30	\$0.00	\$0.30

Restitution List

Restitution	Court Case#	Status	Original Owed Balance	Interest Accrued	Sum of Tx for Date Range for Oblig	Current Balance
RESTITUTION FINE	BA126357	Active	\$5,000.00	\$0.00	\$0.00	\$3,207.00