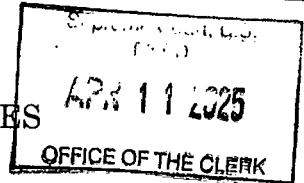


24-7374

No. \_\_\_\_\_

ORIGINAL

ORIGINAL

IN THE  
SUPREME COURT OF THE UNITED STATESCHAYCE AARON ANDERSON— PETITIONER

VS.

THE PEOPLE OF THE STATE OF COLORADO— 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:

**DX** Petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s):

15 CR 1466; 17 CA 469; 19 SC 627; US 19-8425

16 CR 380; 18 CA 334; 20 SC 608; US 20-7139 (And Civil Matters).

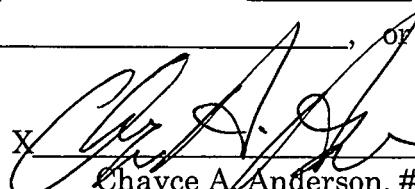
**D** Petitioner has not previously been granted leave to proceed *in forma pauperis* in any other court.

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

**D** Petitioner's affidavit or declaration is not attached because the court below appointed counsel in the current proceeding, and:

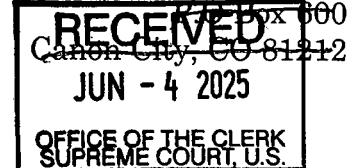
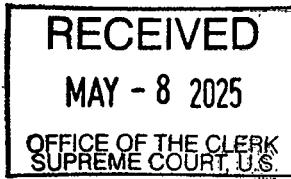
**D** The appointment was made under the following provision of law: \_\_\_\_\_

**D** a copy of the order of appointment is appended.

X   
Chayce A. Anderson, #175290

Centennial Correctional Facility

C.C.C.F.  
6564 St. Hwy. 96  
1new Springs, CO 81062



ORIGINAL

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

I, CHAYCE AARON ANDERSON, 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.

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
Employment Self-employment	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Gifts	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Alimony	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Child Support	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>0.00</u>	\$ <u>N/A</u>	\$ <u>0.00</u>	\$ <u>N/A</u>
<b>Total monthly income:</b>	<b>\$ <u>0.00</u></b>	<b>\$ <u>N/A</u></b>	<b>\$ <u>0.00</u></b>	<b>\$ <u>N/A</u></b>

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>\$10.00/month</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>

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>CDOC commissary account</u>	<u>\$ 250.00</u>	<u>\$ N/A</u>
<u>N/A</u>	<u>\$ N/A</u>	<u>\$ N/A</u>
<u>N/A</u>	<u>\$ N/A</u>	<u>\$ N/A</u>

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

D Home None  
Value N/A

D other real estate None  
Value N/A

D Motor Vehicle #1 None  
Year, make & model N/A  
Value N/A

D Motor Vehicle #2 None  
Year, make & model N/A  
Value N/A

D Other assets None  
Description N/A  
Value N/A

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

<b>Person owing you or your spouse money</b>	<b>Amount owed to you</b>	<b>Amount owed to your spouse</b>
_____	\$ <u>0.00</u>	\$ <u>N/A</u>
_____	\$ <u>0.00</u>	\$ <u>N/A</u>
_____	\$ <u>0.00</u>	\$ <u>N/A</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").

<b>Name</b>	<b>Relationship</b>	<b>Age</b>
N/A	_____	_____
N/A	_____	_____
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.

	<b>You</b>	<b>your spouse</b>
Rent or home-mortgage payment (Include lot rented for mobile home)	\$ <u>0.00</u>	\$ <u>N/A</u>
Are real estate taxes included? D Yes D No		
Is property insurance included? D Yes D No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>0.00</u>	\$ <u>N/A</u>
Home maintenance (repairs and upkeep)	\$ <u>0.00</u>	\$ <u>N/A</u>
Food	\$ <u>0.00</u>	\$ <u>N/A</u>
Clothing	\$ <u>0.00</u>	\$ <u>N/A</u>
Laundry and dry-cleaning	\$ <u>0.00</u>	\$ <u>N/A</u>
Medical and dental expenses	\$ <u>0.00</u>	\$ <u>N/A</u>

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	<b>You</b>	<b>Your spouse</b>
Transportation (not including motor vehicle payments)	\$ <u>0.00</u>	\$ <u>N/A</u>
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0.00</u>	\$ <u>N/A</u>
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0.00</u>	\$ <u>N/A</u>
Life	\$ <u>0.00</u>	\$ <u>N/A</u>
Health	\$ <u>0.00</u>	\$ <u>N/A</u>
Motor Vehicle	\$ <u>0.00</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Taxes (not deducted from wages or included in mortgage payments)		
(Specify): _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Installment payments		
Motor Vehicle	\$ <u>0.00</u>	\$ <u>N/A</u>
Credit card(s)	\$ <u>0.00</u>	\$ <u>N/A</u>
Department store(s)	\$ <u>0.00</u>	\$ <u>N/A</u>
Other: _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Alimony, maintenance, and support paid to others	\$ <u>0.00</u>	\$ <u>N/A</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0.00</u>	\$ <u>N/A</u>
Other (specify): _____	\$ <u>0.00</u>	\$ <u>N/A</u>
Total monthly expenses:	\$ <u>0.00</u>	\$ <u>N/A</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?

D Yes  No If yes, describe on an attached sheet. N/A

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? D Yes  No

If yes, how much? N/A

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

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?

D Yes  No

If yes, how much? N/A

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

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

I have been incarcerated since August 29<sup>th</sup>, 2015; with no reasonable means to make an income to pay for filing fees. Numerous courts have ruled me *in forma pauperis*.

This motion is only filed as it applies to Federal Rights and U.S. Constitutional Rights, is not "frivolous" and has **national significance**.

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

Executed on: 20-04/10/2025

  
X  
Chayce A. Anderson, #175290  
Centennial Correctional Facility  
P.O. Box 600  
Canon City, CO 81212

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Oney Springs, CO 81062