

25-5969

No. _____

ORIGINAL

IN THE
SUPREME COURT OF THE UNITED STATES

FILED
JUN 23 2025
OFFICE OF THE CLERK
SUPREME COURT, U.S.

James Logan Diez — PETITIONER
(Your Name)

VS.

State of Texas _____ = 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):

424th Judicial District Court of Burnet County, Texas

Third District Texas Court of Appeals & Court of Criminal 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 filing fee is enclosed~~ the filing fee is enclosed.

The appointment was made under the following provision of law: _____

N/A or

a copy of the order of appointment is appended.

(Signature)

~~RECEIVED~~

OFFICE OF THE CLERK
SUPREME COURT, U.S.

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

I, James Logan Diez, 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>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Self-employment	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Income from real property (such as rental income)	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Interest and dividends	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Gifts	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Alimony	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Child Support	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Disability (such as social security, insurance payments)	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Unemployment payments	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Public-assistance (such as welfare)	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Other (specify): _____	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____
Total monthly income:	\$ <u>000.00</u>	\$ _____	\$ <u>000.00</u>	\$ _____

NOTE; Petitioner is paying the filing Fee from residual funds he has left in a checking account from before his confinement.

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
PENAL SLAVE/TDCJ	McConnell Unit	2022-present	\$ _____
3001 S. Emily Dr.			\$ _____
Beeville, TX 78102			\$ _____

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
WFA	No Spouse		\$ _____
			\$ _____
			\$ _____

4. How much cash do you and your spouse have? \$6,750.52 (as of 8/5/2025)

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 #260018	\$ 6,750.52	\$ _____
FIRST STATE BANK, P.O. Box 10	\$ _____	\$ _____
Burnet, TX 78611-0010	\$ _____	\$ _____

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings. none

Home
Value None

Other real estate
Value None

Motor Vehicle #1
Year, make & model None
Value _____

Motor Vehicle #2
Year, make & model None
Value _____

Other assets
Description POSSIBLY (2) 60ft X 90ft undeveloped lots in Deceased
Tax Value \$24,840.00
mother's Estate. (unsettled)

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
_____	\$ _____	\$ _____
NONE	\$ _____	\$ _____
_____	\$ _____	\$ _____

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
NONE	_____	_____
_____	_____	_____
_____	_____	_____

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)	Estate Tax \$ <u>800.00/yr</u>	\$ _____
Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <u>000..00</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ <u>000.00</u>	\$ _____
Food	\$ <u>000.00</u>	\$ _____
Clothing	\$ <u>000.00</u>	\$ _____
Laundry and dry-cleaning	\$ <u>000.00</u>	\$ _____
Medical and dental expenses	\$ <u>(sporadic)</u>	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>000.00</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>000.00</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>000.00</u>	\$ _____
Life	\$ <u>000.00</u>	\$ _____
Health	\$ <u>000.00</u>	\$ _____
Motor Vehicle	\$ <u>000.00</u>	\$ _____
Other: <u>late Mother's Estate Tax</u>	\$ <u>800.00/yr</u>	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>Prison Tablet expenses</u>	\$ <u>50.00/mo</u>	\$ _____
Installment payments		
Motor Vehicle	\$ <u>0000.00</u>	\$ _____
Credit card(s)	\$ <u>000.00</u>	\$ _____
Department store(s) [prison commissary]	\$ <u>200.00/mo</u>	\$ _____
Other: <u>Court Fees/legal expenses</u>	\$ <u>varies</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>000.00</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>000.00</u>	\$ _____
Other (specify): _____	\$ <u>000.00</u>	\$ _____
Total monthly expenses:	\$ <u>350+/- 75</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. I have a pending §1983 lawsuit for deprivation of Voting Right which I expect will be resolved favorably in the near future.

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? \$1,000.00 for copying, research & mailing costs.

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

Mrs. Rosanna Hightower *** Mrs. Hightower is legally 80% Deaf;
P. O. Box 573 You must speak loudly and clearly
Auberry, CA 93602 when calling her. (559) 575-5012.

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

~~Please, note, that I AM PAYING the \$300.00 filing fee; but I am
NOT ABLE to cover the costs of paying for all the normally
required printed copies attorneys must submit to the Clerk for
Certiorari Petitions.~~

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

Executed on: September 12th, 2025


(Signature)

(Rev. 12/01)

CAUSE NO. 48895

THE STATE OF TEXAS
v.
JAMES DIEZ

§
§
§
§

IN THE DISTRICT COURT OF
BURNET COUNTY, TEXAS

ORDER ON DEFENDANT'S APPLICATION FOR APPOINTMENT OF ATTORNEY **ON APPEAL**

After considering the application for appointment of attorney filed by the Defendant in the above entitled and numbered cause, and the evidence in support thereof and in opposition thereto, the Court finds that:

Defendant is is not is not fully financially able to employ an attorney and that Defendant's application for appointment should be GRANTED DENIED.

Defendant has not properly completed the Application and the same is hereby DENIED based on:

- Inadequate attempts to hire attorney when apparently able.
- Inadequate attempts to borrow money. See highlighted areas.
- Has assets capable of obtaining loan – must submit at least two loan rejections.
- Financial information is not credible – hearing is required before the judge.
- Other: _____

It is accordingly ORDERED that:

Public Defender's Office OR X **JAMES DRUMMOND** be and is hereby appointed to represent said Defendant.

The Court finds that Defendant is able to pay \$ _____ toward attorney fees and is hereby ORDERED to deposit such sum in the Attorney's Trust Account on or before _____ days from this date, or

at the rate of \$ _____ per (wk)(mo)(ea. Paycheck) until such sum is accumulated. **Attorney shall immediately inform the Court if any payment is missed.** If presently in jail, defendant is ORDERED to begin such payments beginning one week after release on bond.

Defendant employ an attorney for this proceeding and appear, with counsel, before this Court in

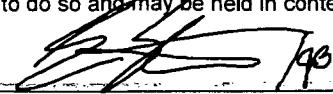
_____ County, Texas, on _____, 19____, at _____ o'clock _____.m. for the purpose of

Review of Application for Ct. app'td Attorney Arraignment, Appearance of counsel,

Status Hearing Other: **5/24/2022 3:34:07 PM**

and, if failing to hire counsel, Defendant shall show cause for the failure to do so and may be held in contempt.

Signed on May 24, 2022.


Judge Presiding

(if checked) Following receipt is required.

I hereby acknowledge receipt of a copy of this ORDER on _____, 20____.

Defendant