

UNITED STATES COURT OF APPEALS
DISTRICT OF COLUMBIA CIRCUIT

333 Constitution Avenue, NW
Washington, DC 20001-2866
Phone: 202-216-7000 | Facsimile: 202-219-8530

USA

USCA No. 23-3074

v.

Jeffrey Scott Brown

USDC No. 1:21-cr-00178-APM

MOTION FOR LEAVE TO PROCEED
ON APPEAL IN FORMA PAUPERIS

I, Jeffrey Scott Brown, declare that I am the
 appellant/petitioner appellee/respondent in the above-entitled proceeding. In support
of this motion to proceed on appeal without being required to prepay fees, costs or give security
therefor, I state that because of my poverty I am unable to prepay the costs of said proceeding
or to give security therefor. My affidavit or sworn statement is attached.

I believe I am entitled to relief. The issues that I desire to present on appeal/review are as
follows: *(Provide a statement of the issues you will present to the court. Attach an additional
sheet if necessary.)*

Signature



Name of Pro Se Litigant

Jeffrey Brown

Address

FCI Victorville Medium II

PO Box 3850, Adelanto, CA 92301

Submit original with a certificate of service to:

Clerk of Court
United States Court of Appeals
for the District of Columbia Circuit
E. Barrett Prettyman U.S. Courthouse, Room 5523
333 Constitution Avenue, N.W.
Washington, DC 20001

**UNITED STATES COURT OF APPEALS
DISTRICT OF COLUMBIA CIRCUIT**

333 Constitution Avenue, NW
Washington, DC 20001-2866
Phone: 202-216-7000 | Facsimile: 202-219-8530

USA

USCA No. 23-3074

v.

Jeffrey Scott Brown

USDC No. 1:21-cr-00178-APM

**AFFIDAVIT ACCOMPANYING MOTION FOR
PERMISSION TO APPEAL IN FORMA PAUPERIS**

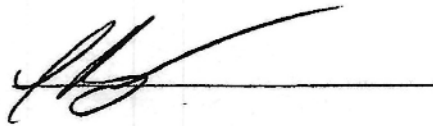
Affidavit in Support of Motion

I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Signed: _____



Date: _____

6/14/23

My issues on appeal are: _____

Jury instructions and sufficiency of
evidence related to 18 USC 111(b) count and other
errors of law.

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	0			
Self-employment	0			
	You	Spouse	You	Spouse
Income from real property (such as rental income)	0			
Interest and dividends	0			
Gifts	GSG			
Alimony	0			
Child support	0			
Retirement (such as social security, pensions, annuities, insurance)				
Disability (such as social security, insurance payments)	0			
Unemployment payments	0			
Public-assistance (such as welfare)	66			
Other (specify): _____				
Total monthly income:	0			

2. List your 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
System Pavers	Santa Ana	6/16-8/21	4000
_____	_____	_____	_____
_____	_____	_____	_____

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
NA	_____	_____	_____
_____	_____	_____	_____

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.

Financial Institution	Type of Account	Amount you have	Amount your spouse has
Chase	Checking	\$500	_____
Capitol One	Credit Card	-\$4000	_____
_____	_____	_____	_____

If you are a prisoner, seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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 _____ (Value)
0	_____	Make & Year: _____
_____	_____	Model: _____
_____	_____	Registration #: _____
Motor Vehicle #2 _____	Other Assets (Value)	Other Assets (Value)
Make & Year: _____	_____	_____
Model: _____	_____	_____
Registration #: _____	_____	_____

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
NA		

7. State every person, business, or organization to whom you or your spouse owes money, the nature of the indebtedness, and the amount owed.

Person to whom you or your spouse owe money	Nature of indebtedness (e.g., mortgage, credit card)	Amount owed	
		by you	by spouse
Capital One	credit card	\$4,000	
Taxes		\$11,000	

8. State the persons who rely on you or your spouse for support.

Name [or, if under 18, initials only]	Relationship	Age
NA		

9. 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, semiannually, or annually to show the monthly rate.

	You	Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	NA	
Are real-estate taxes included?	<input type="radio"/> Yes	<input type="radio"/> No
Is property insurance included?	<input type="radio"/> Yes	<input type="radio"/> No
	You	Spouse
Utilities (electricity, heating fuel, water, sewer, and telephone)	NA	
Home maintenance (repairs and upkeep)	NA	

	You	Spouse
Food	NA	
Clothing	NA	
Laundry and dry-cleaning	NA	
Medical and dental expenses	NA	
Transportation (not including motor vehicle payments)	NA	
Recreation, entertainment, newspapers, magazines, etc.	NA	
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	NA	
Life	NA	
Health	NA	
Motor Vehicle	NA	
Other: _____		
Taxes (not deducted from wages or included in mortgage payments)	NA	
(specify) _____		
Installment payments		
Motor Vehicle	NA	
Credit card (name): <u>Capital One</u>	\$100	
Department store	NA	
(name): _____		
Other: _____		
Alimony, maintenance, and support paid to others	NA	
Regular expenses for operation of business, profession, or farm (attach detailed statement)	NA	
Other(specify): <u>Jail Expenses</u>	700	
Total monthly expenses:	800	

10. 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.

11. 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:

12. 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?

If yes, how much? NA

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

13. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

14. State the city and state of your legal residence.

Irvine, CA

Your daytime phone number: (____) _____ - _____

Your age: 55 56 Your years of schooling: 16