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APPLICATION TO PROCEED
IN FORMA PAUPERIS
BY A PRISONER

Petitioner
vs.

CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA
J. A. DEPUTY CLERK

Respondent(s)

CASE NUMBER: 2:08-CV-1246

I, Joel TAYLOR, declare that I am the petitioner in the above-entitled proceeding; that, in support of my request to proceed without prepayment of fees under 28 U.S.C. § 1915, I declare that I am unable to pay the fees for these proceedings or give security therefor and that I am entitled to the relief sought in the petition.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated: Yes No (If "No" DO NOT USE THIS FORM)

If "Yes" state the place of your incarceration. CSP- Solano State Prison

Have the institution fill out the Certificate portion of this application.

2. Are you currently employed? Yes No

a. If the answer is "Yes" state the amount of your pay. 25⁺ hr

b. If the answer is "No" state the date of your last employment, the amount of your take-home salary or wages and pay period, and the name and address of your last employer. Doc. 21 Att. 1

3. In the past twelve months have you received any money from any of the following sources?

- a. Business, profession or other self-employment Yes No
- b. Rent payments, interest or dividends Yes No
- c. Pensions, annuities or life insurance payments Yes No
- d. Disability or workers compensation payments Yes No
- e. Gifts or inheritances Yes No
- f. Any other sources Yes No

If the answer to any of the above is "Yes" describe by that item each source of money and state the amount received and what you expect you will continue to receive. Please attach an additional sheet if necessary.

4. Do you have cash or checking or savings accounts? Yes No

If "Yes" state the total amount: 0

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? Yes No

If "Yes" describe the property and state its value. _____

6. Do you have any other assets? Yes No

If "Yes" list the asset(s) and state the value of each asset listed.

7. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support.

JOEL TAYLOR - self, - 0

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

6-26-08

DATE

Joel Taylor

SIGNATURE OF APPLICANT

CERTIFICATE

(To be completed by the institution of incarceration)

I certify that the applicant named herein has the sum of \$ 0.00 on account to his/her credit at

CSP - Solano

(name of institution). I further certify that during the past six months

the applicant's average monthly balance was \$ 0.00. I further certify that during the past six months the

average of monthly deposits to the applicant's account was \$ 0.00.

7/2/08

DATE

Barbara Patton

SIGNATURE OF AUTHORIZED OFFICER

REPORT ID: TS3030 .701

REPORT DATE: 07/02/08
PAGE NO: 2

CALIFORNIA DEPARTMENT OF CORRECTIONS
CALIFORNIA STATE PRISON SOLANO
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2008 THRU JUL. 02, 2008

ACCT: V73285 ACCT NAME: TAYLOR, JOEL MANUEL ACCT TYPE: I

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	2.93	0.00	2.93	43.22	0.00

CURRENT AVAILABLE BALANCE 40.29



COPY OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE.

ATTEST:
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY *Barbara Patton*
TRUST OFFICE

I, JOEL TAYLOR, declare that: DUE TO INSTITUTIONAL RETALIATIONS:

ON 7-3-08, I INFORMED CUSTODIAL OFFICIALS OF THE COURT ORDER TO SUBMIT THE FORMA PAUPERUS FOR PRO-PER STATUS WITH THE COURTS. ALSO THAT I HAVE TO BE ESCORTED TO SEE THE COUNSELOR. SO SHE CAN GIVE ME A CERTIFIED COPY OF MY 1/2 TRUST ACCOUNT. AT 10:30 AM.

AT 1 PM. CCI CARROZZO, MY COUNSELOR CAME TO H-DORM (THE GYM) WHERE I'M BEING HOUSED. CCI CARROZZO STATED IN FRONT OF OTHER INMATES "YOU HAVE TO FILE A REQUEST FOR INTERVIEW FORM" I INFORMED CCI CARROZZO I ALREADY FILED IT BY LEGAL MAIL, SIGNED BY CD BENSON. ON 6-26-08, WOULD YOU LIKE TO SEE A COPY OF THE 1/2 REQUEST FOR INTERVIEW AND TRUST WITHDRAWAL ATTACHED TO THE APPLICATION TO PROCEED INFORMA PAUPERUS. CCI CARROZZO SAID "NO I ALREADY HAVE IT". THIS WAS WITNESSED BY INMATE Calvin Dunston ^{D-74396}. ON 7-3-08, I INFORMED CCI CARROZZO, AS THE DOCUMENT SAY I'M ON A COURT ORDERED DEADLINE. CCI CARROZZO STILL DID NOT SIGN THE APPLICATION FORMS I PRESENTED TO HER, NOR DID SHE PROVIDE 1/2 A CERTIFIED COPY OF 1/2 TRUST ACCOUNT.

AS STATED IN ORIGINAL 1983 I FILED. CCI PALMER REFUSED TO SIGN AND VERIFY 1/2 TRUST ACCOUNT STATEMENT. AS THIS PATTERN OF BEHAVIOR CONTINUES. IT DENIES 1/2'S HIS RIGHT TO EXERCISE HIS CONSTITUTIONAL RIGHTS AND DUE PROCESS OF THE UNITED STATES CONSTITUTION.

ALSO I'M ACCESS TO COURTS SHALL NOT BE HINDERED BY LAW. 1/2 FILED ANOTHER 1/2 REQUEST TO SEE COUNSELOR TO GET A COPY OF 1/2 TRUST ACCOUNT, CERTIFIED. BUT WAS UNABLE. DUE TO CIRCUMSTANCES BEYOND MY CONTROL. SEE ATTACHED 1/2 REQUEST.

INMATE REQUEST THE COURTS PROCEED TO GRANT 1/2 INFORMA PAUPERUS STATUS. AS 1/2 HAS STATED IN ORIGINAL 1983. CCI PALMER REFUSED TO CERTIFY 1/2 ACCOUNT.

FILED

AUG 04 2008

CLERK, U.S. DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA

BY _____
DEPUTY CLERK

I certify (or declare) under the penalty of perjury under the laws of the State of California that the foregoing is true and correct: CCPS 2015.5
28 U.S.C. § 1746; executed on;

7-5-08
DATE

Joel Taylor
SIGNATURE

ATTN: DUE TO 1/2 LOCK DOWN, 1/2 IS FORCED TO WRITE HAND WRITE COPIES OF DECLARATIONS. DUE TO IMPORTANCE OF COURT ORDER. Joel Taylor 7-5-08

INMATE/PAROLEE APPEAL FORM
 CDC 603 (12/87)

Location: Institution/Parole Region CSP-S Log No. 07-02649 Category _____

63 mail room

You may appeal any policy, action or decision which has a significant adverse affect upon you. With the exception of Serious CDC 115s, classification contracts, contracts and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

NAME <u>Taylor Joel</u>	NUMBER <u>10-22-07</u>	ASSIGNMENT <u>10-22-07</u>	UNIT/ROOM NUMBER <u>2-360</u>
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A. Describe Problem: On July 9, 2007, I handed 60 Lazardas legal mail to sign, which was an appeal addressed to Director of Corrections, PO Box, 942883, Sacramento, CA 94283-0001, Pursuant to the mail Box Rule. Also state and Federal Regulations, Citing title 15 § 3089(a) inmates may appeal any departmental decision. 3089.1(d) states No reprisals shall be taken against inmate for filing APPEAL, which is considered legal mail, Confidential Correspondence, Pen C. 3141 (a) (b) (c) Inmates confined in departmental facilities may correspond confidentially with all state and federal officials, having an responsibility for inmates present of future custody. 3141 (c) also state and federal Judges, and Courts, Confidential Correspondence is a right guaranteed by law! Also since filing 602 Log# CMF-07-M-00262, I been harrassed and Burdened By the Department of CDC Employees, medical Personnel, and C.C.I. See Attached GA-22 (9/92)

B. Action Requested: I Request Confidential Correspondence with Both state and federal, Offices/Courts (Pen C. 3141) Also for my Appeals to be responded to in a timely manner. Also for a legal manifest of the Legal mail I sent out ON JULY 9, 2007 (Pen C. 3141) And for CDC to Stop Sending Employees by my Cell with Deictful Documents for me to Sign, Jackura saying its for Committee Pen C. 3413, No Employee of CDC will engage in any activity of illegal nature!

Inmate/Parolee Signature: Taylor Joel Date Submitted: July 17, 2007

C. INFORMAL LEVEL (Date Received: 7/17)
 Staff Response: a copy is attached

Staff Signature: A. Allen, OSST Date Returned to Inmate: _____

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D. FORMAL LEVEL
 If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chrono, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response:

I Request AN INVESTIGATION by internal Affairs, for the Aberrations of my liberty rights, Based ON CDCR UNDERGROUND Rules of Virtue and morality. And Appeals Coordinators deliberate indifference to my Appeals, CITE ART I 24 the equal protection of the laws, due process and not to suffer the imposition of cruel & unusual Punishment, ARE GUARANTEED by California Constitution, ART I 59 A bill of Attainder or law impairing the obligation of contracts may not be Passed. The Aberrations of CDCR, endangers Appellates life, and denies him liberty, send info to internal Affairs Thank You. Also see 3rd level Response # CMF-07-M-00262

Signature: Joel Taylor Date Submitted: 8-21-07

Note: Property/Funds appeals must be accompanied by a completed Board of Control form BC-1E, Inmate Claim
 CDC Appeal Number: _____

#5 separate 153403 8-23-07
 #5-F 10/20/07
 2nd 10/17/07

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 3 CSP SOLANO APPEALS OFFICE

Appeals

E. REVIEWER'S ACTION (Complete within 15 working days): Date assigned: 8-28-7 Due Date: 10-11-7

Interviewed by: Sgt Beady
A copy of your log of Inmate Mail is attached.

Staff Signature: [Signature] Title: Sgt Date Completed: 10-1-07
Division Head Approved: [Signature] Signature: [Signature] Title: AWCS Returned: DOCT - 4 2007
Date to Inmate: _____

F. If dissatisfied, explain reasons for requesting a Second-Level Review, and submit to Institution or Parole Region Appeals Coordinator within 15 days of receipt of response.
See Attached 3RD Level REVIEW from Chief of Appeals of 602 CMF-01-M-00262
Ym sent original 602 to Director of Corrections, for 3RD level REVIEW. Was CMF-01-M-00262. Then later
I sent a copy of the same 602 Pursuant to State & Federal Rules, title 15 § 3084 (2) Inmates may appeal an
decision affecting their confinement, 3RD level response states they never received original 602. I am
3084 (2) No reprisal AGAINST Ym for filing appeal. I believe 602 held back by CDC on purpose, Request investigation by
Internal Affairs citing PL 1473-1508
Signature: Taylor Joel Date Submitted: 8-23-07

RESPONSE ON CDC FORM 602

Second Level Granted P. Granted Denied Other _____

G. REVIEWER'S ACTION (Complete within 10 working days): Date assigned: 10-17-07 Due Date: 11-15-07

See Attached Letter
Signature: [Signature] Date Completed: 12/19/07
Warden/Superintendent Signature: [Signature] Date Returned to Inmate: DEC 27 2007

H. If dissatisfied, add data or reasons for requesting a Director's Level Review, and submit by mail to the third level within 15 days of receipt of response.
According to work-ups by Institution and Appeals Coordinator, CDC Administrations Course of Conduct Poses a Management
Concern, as response to Ym Appeals are delayed, interfered with, or late. Ym Appeals are purposely being interfered
with by Administration concerning Ym medical Appeals, then wrongly categorized, demonstrating actions of High Levels of
Criminal Sophistication by Administration, for failure to perform pre-existing duties under the constitution,
Even though Ym received 3RD level review on appeal CMF-M-0700262, Ym was not interviewed at 3RD level. Ym
continues to be harassed by medical & custodial staff and still lives in chronic pain daily, while CDC find more
ways to cover-up for its employees.
Signature: Taylor Joel Date Submitted: 12-28-07

For the Director's Review, submit all documents to: Director of Corrections
P.O. Box 942883
Sacramento, CA 94283-0001
Attn: Chief, Inmate Appeals

DIRECTOR'S ACTION: Granted P. Granted Denied Other _____

See Attached Letter
Date: APR 10 2008

Outgoing Legal Mail History



California State Prison-Solano

<i>DATE</i>	<i>INMATES NAME</i>	<i>CDC</i>	<i>ADDRESSEE</i>
7/1/2008	TAYLOR	V73285	U.S. DIST. CRT EASTERN DIST OF CA OFFICE OF THE CLERK SAC CA 95814-2322
7/1/2008	TAYLOR	V73285	DIRECTOR OF CORRECTIONS P.O. BOX 94283 CHIEF INMATE APPLS
7/8/2008	TAYLOR	V73285	OFFICE OF THE CLERK U.S DIST CRT EASTERN DIST OF CA SAC CA 95814

CDC Legal OUT Going Manifest
 Showing CCI Carrozzo Did
 Not mail 1/2 Legal mail
 ON 7-24-08, so I submit the
 certifie copy of 1/2 Trust myself. Thank You

STATE OF CALIFORNIA
GA-22 (9/92)

INMATE REQUEST FOR INTERVIEW

DEPT

DATE 6-26-08	TO TRUST office	FROM (LAST NAME) Taylor
HOUSING H-D	BED NUMBER 133 m	WORK ASSIGNMENT Pm Pot Crew
OTHER ASSIGNMENT (SCHOOL, THERAPY, ETC.)		JOB NUMBER FROM ASSIGNMENT FROM

Clearly state your reason for requesting this interview.

You will be called in for interview in the near future if the matter cannot be handled by cor

I REQUEST COPY AND SIGNATURE OF Ym TRUST ACCOUNT FOR LEGAL DEADLINE, I LEGAL DOCUMENTS FOR SIGNATURE, THANK YOU ALSO ATTACHED Ym TRUST WITH.

INTERVIEWED BY

B. Patten

DISPOSITION

I m Taylor per your request. I have 6 month statement. I have sent orig statement and paperwork to you.

Your honor, on 7-24-08, I handed CCI Carrozzo a Legal Addressed envelope To the Courts, She informed me as my Counselor She has to mail it. So I Gave It to her. I waited a few days, Then ReRequested A COPY of MY Ym Legal mail Manifest, which I attached. Which shows CCI Carrozzo Never mailed my Legal mail, I filed a 602 on it. Its attached to this Pro Per Package, This is a Emergency! I need medical help Diagnoses, Treatment, Relief, They are goin to allow This symptoms to Progress unto Fatality. While reporting on Paper Its a mystery and or Im totally healthy. your honor They must be held accountable for destroying human lives! Also see Attached 602 CP-5-07-02649 ABOUT CDC Not Sending out Ym Legal mail.

**INMATE/PAROLEE
APPEAL FORM**
CDC 602 (12/87)

Location: Institution/Parole Region _____ Log No. _____ Category _____
 1. _____ 1. _____
 2. _____ 2. _____

You may appeal any policy, action or decision which has a significant adverse affect upon you. With the exception of Serious CDC 115s, classification committee actions, and classification and staff representative decisions, you must first informally seek relief through discussion with the appropriate staff member, who will sign your form and state what action was taken. If you are not then satisfied, you may send your appeal with all the supporting documents and not more than one additional page of comments to the Appeals Coordinator within 15 days of the action taken. No reprisals will be taken for using the appeals procedure responsibly.

NAME <u>Taylor J</u>	NUMBER <u>V-73285</u>	ASSIGNMENT <u>Pm - Pot crew</u>	UNIT/ROOM NUMBER <u>H-D-180L</u>
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A. Describe Problem: ON 6-26-08, I'm sent custodial officials a Request for interview & trust withdrawal attached to a application to Proceed in forma Pau Peris, informing them of legal deadline, ON 7-3-08, I spoke to CCI Carrozzo about a certificate copy of I'm account, I put in more I'm Request Reminding her I need the forms I sent her, ON 7-16-08 CCI responded to I'm Request sayin "she's unclear on what im talking about, and she dont have the forms" ON 7-17-08 I'm informed C/o Shea His need to see the counselor, todays open line. C/o Shea said Come back after breakfast & I will do it." AT 9am, 10am, 11am I asked, 12:30pm 1pm 2pm I asked, but did not see the counselor that day. AT 1pm when I asked C/o Shea said "I'm goin to fill your C-File Taylor, see whats in it." ON 7-18-08, CCI Carrozzo Told me to give her a SELF ADDRESSED envelope, then held up the Pro-Per package I sent. I asked to see it to verify the information, Carrozzo said if I dont give her the envelope she dont have to give me nothing. CCI NAVARRO said thats true, in the office.
 If you need more space, attach one additional sheet.

B. Action Requested: I'm have a Guaranteed Right to Confidential Correspondence to the Courts, Pen C, 314.1(f) Also Appeal Any departmental decision 308.1. These actions by Custodial officials made me miss legal deadline, blocked I'm access to Courts, US Constitution 1st Amendment & Violates Due Process of both State & Federal Rules of Court. Also Article I 9, A bill of Attainder, or law impairing the obligation of contracts may not be imposed or passed. US Constitution Cite Also ART I 9 24, Equal Protection of the law and Due Process.
 Inmate/Parolee Signature: Jail Taylor Date Submitted: 7-20-08

C. INFORMAL LEVEL (Date Received: _____)

Staff Response: _____

Staff Signature: _____ Date Returned to Inmate: _____

D. FORMAL LEVEL

If you are dissatisfied, explain below, attach supporting documents (Completed CDC 115, Investigator's Report, Classification chrono, CDC 128, etc.) and submit to the Institution/Parole Region Appeals Coordinator for processing within 15 days of receipt of response.

Signature: _____ Date Submitted: _____

Note: Property/Funds appeals must be accompanied by a completed Board of Control form BC-1E, Inmate Claim.

CDC Appeal Number: _____



Pursuant to Rule 5 of the F.R.Cv.P. and Local Rule 5-135, each document filed after the court orders service in your case shall be served on opposing counsel and a proof of service attached to your document filed with the court.

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF CALIFORNIA

(Case Title) Joel Taylor
Plaintiff or Petitioner

Case Number: 2:08-cv-1246 Jam KJM

v. Warden CMF - Vacaville, et al
Defendant or Respondent

PROOF OF SERVICE

I hereby certify that on (Date) July 31, 2008, I served a copy
of the attached 3p Informa Pauper's Package, 1 Km REQUEST, 1 Declaration, 1 Legal manifest, 2 Km 602's

by placing a copy in a postage paid envelope addressed to the person(s) hereinafter listed, by depositing said
envelope in the United States Mail at CSP Solano PO, Box 4000, Vacaville California

(List Name and Address of Each Defendant or Attorney Served)

United States District Court
Eastern District of California
Office of the Clerk
501 I Street, Suite 4-200
Sacramento, California 95814-2322

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

Joel Taylor
(Name of Person Completing Service)