

1 Eli Dalton-Webb
2 5009 E. Ironwood Circle
3 Sierra Vista, Arizona 85650
4 email: dw4az@proton.me
5 *Plaintiff*
6

7 **IN THE SUPERIOR COURT OF THE STATE OF ARIZONA**

8
9 **IN AND FOR THE COUNTY OF YAVAPAI**

<p>10 11 Eli Dalton-Webb, 12 13 14 Plaintiff 15 16 v. 17 18 CITY OF PRESCOTT, a municipal 19 corporation in Arizona, OFFICER 20 CARON (#517), OFFICER TRUJILLO, 21 SGT. GERLACH, LT. NOVAK, 22 OFFICER BRAMBILA, CHIEF 23 BONNEY, peace officers of the Prescott 24 Police Department, JOHN DOES I-X, 25 JANE DOES I-X, ABC 26 CORPORATIONS I-X, XYZ 27 PARTNERSHIPS I-X, UNKNOWN 28 ENTITIES I-X, 29 30 31 Defendants 32</p>	<p>Case No. Division: Civil Rights Violations; Article 2 § 6 of the Arizona Constitution; A.R.S. § 32- 1101.01; etc. RE: Fee Waiver Application</p>
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34 To the Duty Judge (and Clerk of Court, see “electronic filing” note):

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36 **FEE WAIVER APPLICATION**
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38 This is the Plaintiff’s first time interacting with the Yavapai County court
39 system whatsoever. Plaintiff attaches a filled fee waiver application—a filled PDF.
40
41 The Cochise County Superior Court, which is the court the Plaintiff is accustomed to,
42 usually gives the Plaintiff a hard time when e-filing because their Cochise County
43
44 Local Rules require editable order proposals and the PDF order proposal template
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1 from AOC (administrative office of the courts) is unacceptable, but submitting my
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3 own order proposal was acceptable. For the Court's courtesy, Plaintiff submits both
4
5 (1) AOC's PDF order proposal; and (2) Plaintiff's own order proposal.
6

7
8 **INCOME**

9 I do odd jobs here and there. Right now, I do not have any customers. I would
10 say I have consistently made less than \$1,000 per month for the past 20 months. I've
11 been able to scrape by with help from family, and I have been putting off stuff that I
12 need to do—like buying new shoes (my shoes have some holes in them) and new
13 clothes (I only have one set of business casual clothes). I have fluctuating income and
14 fluctuating expenses.
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22 **REQUEST**

23 I request a compassionate waiver of fees. If not, I secondarily request a fee
24 deferral, and request that the payments start to be due at the conclusion of me
25 completely paying off the later of S-0200-CV-202400628 or S-0200-CV-202400428.
26
27
28

29 I am already paying fee deferrals in the following cases:
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31

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S-0200-CV-202400628	Cochise County Superior Court	\$20/mo
S-0200-CV-202400428	Cochise County Superior Court	\$20/mo

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38 I struggle to pay these court cases, especially on time, and I have already
39 requested twice now to skip payments because I couldn't afford them that month.
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1 I also am worried about the payment processing fee for payment card, because
2
3 it would be absurd to travel 6 hours by car (and 6 hours back, for 12 hours) just to
4
5 pay a small court fee installment.
6

7 ELECTRONIC FILING

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9 To the Duty Judge and Clerk of Court:
10

11 1. I sent a physical letter to the Clerk of this Court, asking for information
12 regarding electronic filing of fee applications, and the clerk told me that electronic
13 filing is permitted for fee deferrals.
14
15

16 2. This application is filed electronically, as nothing in Arizona Code of
17 Judicial Administration (ACJA) § 1-901 prohibits fee deferral/waiver applications
18 from being e-filed. Additionally, it unconstitutional for the clerk to reject an e-filing
19 for a fee waiver/deferral application, as it treats indigent litigants differently than
20 those who can pay, as that would violate Article 2 Section 13 of the Arizona
21 Constitution, and would cause an unnecessary delay of the administration of justice,
22 violating Article 2 § 11 of the Arizona Constitution.
23
24

25 3. ACJA § 1-901(B) states: “This section...apply to all e-filed documents.”
26

27 4. ACJA § 1-901(F)(3) allows a self-represented litigant to e-file documents.
28

29 5. ACJA § 1-901(Attachment A)(I)(A)(1) allows for civil case post-initiation
30 documents. “Post-initiation Submission’ means any submission for filing into a case
31 that has previously been initiated in the court, either electronically or by paper.”
32
33 (pursuant to the definition given in ACJA § 1-901), which includes a fee
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35 waiver/deferral application. “Document’ means any pleading, motion, exhibit (other
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1 than a courtroom exhibit), declaration, affidavit, memorandum, **paper**, order, notice,
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3 **or any other filing**, including attachments, submitted by a filer or by the court.”

4
5 (pursuant to the definition given in ACJA § 1-901), which includes a fee
6
7 waiver/deferral application. This means that, pursuant to ACJA § 1-901(Attachment
8
9 A)(I)(A)(1), Plaintiff is authorized to file a fee deferral/waiver application
10
11 electronically.

12
13
14 6. ACJA § 1-901(Attachment A)(I)(C) SPECIFICALLY allows for
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16 applications for deferrals and waivers to be e-filed.

17
18 7. ACJA § 1-901(Attachment A)(III)(A) does not exclude applications for
19
20 deferrals and waivers from being e-filed.

21
22 8. ACJA § 1-901(Attachment A)(III)(B)(1)(a) does not apply to this case, and
23
24 therefore, does not exclude Plaintiff from filing a fee deferral/waiver application.
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27 **E-MAIL PREFERRED METHOD**

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29 Plaintiff requests from this Court and the Clerk of this Court, to send
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31 correspondence related to this matter via e-mail to dw4az@proton.me .
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38 Submitted respectfully this day, 21 April 2025,
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44 /s/ 

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46 Eli Dalton-Webb
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Person Filing: _____
 Address (if not protected): _____
 City, State, Zip Code: _____
 Telephone: _____
 Email Address: _____
 Representing Self or Lawyer for _____
 Lawyer's Bar Number: _____

For Clerk's Use Only

_____ **COURT OF ARIZONA**
IN _____ **COUNTY**

 Name of Petitioner/Plaintiff
 -vs-

 Name of Respondent/Defendant

Case Number: _____

**APPLICATION FOR DEFERRAL OR
 WAIVER OF COURT FEES OR
 COSTS AND CONSENT TO ENTRY
 OF JUDGMENT**

NOTICE

- A **Fee Deferral** is only a temporary postponement of the payment of the fees due. You may be required to make payments depending on your income.
- A **Fee Waiver** is usually permanent unless your financial circumstances change during the course of this court action.
- You must attach the **required proof** when filing your Application. If you do not attach the required proof, you **must** complete the financial questionnaire in section 3.
- In the Application, "I" and "you" refer to either the "Applicant" (in all case types, except for probate) or the "Estate/Ward/Protected Person" (in probate cases).

1. I cannot pay the following fees and costs in my case:

- Any or all filing fees, fees for the issuance of either a summons or subpoena, the cost of attendance at an educational program for divorce and legal separation cases required by A.R.S. § 25-352, court accountant fees and costs, court investigator fees and costs, fees for obtaining one certified copy of letters of temporary or permanent appointment, fees for obtaining one certified copy of a temporary order in a family court case or a final order, judgment, or decree in all civil proceedings.
- Fees for service of process by a sheriff, marshal, constable, or law enforcement agency.*
- Fees for service by publication.*
- Filing fees and photocopy fees for the preparation of the record on appeal.
- Court reporter or transcriber fees for the preparation of court transcripts, if the court reporter or transcriber is employed by the court.

***NOTE:** To defer or waive fees for service of process or for service by publication, you must also complete the **Affidavit in Support of Application for Deferral or Waiver of Service of Process Fee** form (Form No. AOCDFGF3F).

2. I am requesting a deferral or waiver of fees and costs in my case because:

A. I receive government assistance from the federal Supplemental Security Income (SSI) program.*

I have attached the required **proof** that I participate in the **Supplemental Security Income program**. The proof shows my name as the benefit's recipient and the name of the agency that provides the benefit.



(If you have attached proof, you do not need to complete the financial questionnaire in section 3.)

Supplemental Security Income (SSI) is **NOT the same as regular retirement benefits from the Social Security Administration or Social Security Disability Insurance (SSDI)*

OR

B. I receive government assistance from the state or federal program marked below:

Temporary Assistance to Needy Families (TANF)

Food Stamps

I have attached the required **proof** that I participate in a **government assistance program**. The proof shows my name as the benefit's recipient and the name of the agency that provides the benefit.



(If you have attached proof, you do not need to complete the financial questionnaire in section 3.)

OR

C. I receive legal assistance from a non-profit legal aid program.

I have attached the required **proof** that I receive legal assistance from a **non-profit legal aid program**. The proof shows my name as the recipient and the name of the legal aid provider that provides the assistance.



(If you have attached proof, you do not need to complete the financial questionnaire in section 3.)

OR

D. My income is insufficient or is barely sufficient to meet the daily essentials of life, and includes no allotment that could be budgeted for the fees and costs that are required to gain access to the court. My gross income as computed on a monthly basis is 150% or less of the current federal poverty level. (Note: Gross monthly income includes your share of your

spouse or domestic partner’s income if available to you.) *(See the Poverty Levels Chart in 2(H) to determine if your income is 150% or less of the poverty level.)*

OR

E. I am permanently unable to pay. My income and liquid assets are insufficient or barely sufficient to meet the daily essentials of life and are unlikely to change in the foreseeable future.

OR

F. I do not have the money to pay court filing fees and costs now. I can pay the filing fees and costs at a later date. Explain. _____

OR

G. My income is greater than 150% of the poverty level, but I have proof of extraordinary expenses (including medical expenses and costs of care for elderly or disabled family members) or other expenses that reduce my gross monthly income to 150% or below the poverty level. *(See the Poverty Levels Chart in 2(H) to determine if your income is 150% or less of the poverty level.)*

DESCRIPTION OF EXTRAORDINARY EXPENSES	AMOUNT
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL EXTRAORDINARY EXPENSES	\$ _____

H. **POVERTY LEVELS CHART.** The chart below lists the gross monthly income levels at 150% of the current federal poverty levels based on **household size**. Household size is the number of related individuals living in your home, including yourself, that you support financially. Use the chart to determine the poverty levels based on your household size and whether your gross monthly income is less than, or more than, 150% of the poverty levels.

(AS OF JANUARY 17, 2025)

Household Size (all related individuals)	Gross Monthly Income Level-150%	Household Size (all related individuals)	Gross Monthly Income Level-150%
1	\$1,956	5	\$4,706
2	\$2,644	6	\$5,394
3	\$3,331	7	\$6,081
4	\$4,019	8*	\$6,769

3. FINANCIAL QUESTIONNAIRE

You must complete the financial questionnaire unless you have attached the proof required in section 2(A) for SSI, 2(B) for government assistance, or 2(C) for non-profit legal aid program.

A. How many people, including yourself, do you support financially (including those you pay child support or spousal maintenance for)? _____

List relationship of those you support and check those living with you:

_____ _____ _____ _____
 _____ _____ _____ _____

B. Do you have a job? [] Yes [] No

Employer name: _____

Employer phone number: _____

C. What is your approximate **gross monthly income (total income before deductions)**? \$ _____

D. What is your approximate **monthly take home pay (total income after deductions)**? \$ _____

E. Do you have income from the following sources?

[] social security [] disability [] veteran's benefits
[] unemployment benefits [] spousal or child support
[] investments [] other: _____

• What is your approximate **total gross monthly income** from these sources? \$ _____

• What is your **spouse or domestic partner's approximate total gross monthly income** from all sources readily available to you? \$ _____

F. What is the approximate **total balance of bank and credit union accounts** accessible without financial penalty? \$ _____

G. What are your **average total monthly expenses**, including rent/mortgage, utilities, vehicle/transportation, credit cards, insurance, medical/dental, child support, childcare, spousal maintenance, tuition, or other expenses? \$ _____

CONSENT TO ENTRY OF JUDGMENT

By signing this Application, I agree that a consent judgment may be entered against me for all fees or costs that are deferred but remain unpaid 30 calendar days after entry of the final judgment, decree, or order unless I establish a payment plan and make timely payments, or I submit a Supplemental Application and the court has not made a ruling on it.

You will receive a **Notice of Court Fees and Costs Due** from the court indicating (1) how much is owed and (2) what steps to take to avoid a consent judgment against you.

NOTE: You may be ordered to repay any amounts that were waived if the court finds you were not eligible for the fee deferral or waiver. If your case is dismissed for any reason, the fees and costs are still due.

If you are asking for deferral or waiver for service of process costs, or service by publication costs, you must complete the **Affidavit in Support of Application for Deferral or Waiver of Service of Process Fee** form (Form No. AOCDFGF3F).

OATH OR AFFIRMATION FOR APPLICATION FOR DEFERRAL OR WAIVER OF COURT FEES AND COSTS

I declare under penalty of perjury that I have read the above statements and to the best of my knowledge and belief these statements are true and correct.

Date



Applicant's Signature

Applicant's Printed Name