## Accordingly,

**IT IS HEREBY ORDERED** directing the Clerk of Court to send a copy of this Order and the attached CJA Financial Affidavit to Ronald J. McBride at P.O. Box 982, Florence, AZ 85132 and to Desiree Saunders, 3341 Arianna Court, Gilbert, AZ 85298.

DATED this 27<sup>th</sup> day of September, 2010.

Mary H. Murgula United States District Judge

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©CJA 23			FINAN(	CIAL AF	FIDAVIT	•	
Rev. 5/98 IN UNIT IN THE CASE OF	IN S FED STATES	SUPPORT OF REQUEST FOR MAGISTRATE DIST		XPERT OR OTHI PEALS COURT or	ER COURT SERVICE  OTHER PANE	L (Specify below)	OF FEE ON NUMBER
	V.5	S	FOR AT			<b></b>	
<b>•</b>	ED (Show your full name)	☐ Felony ☐ Misdemeanor		1 Defendant—Ad 2 Defendant - Juv 3 Appellant 4 Probation Viola 5 Parole Violator 6 Habeas Petition 7 2255 Petitioner 8 Material Witne 9 Other	Distriction Court	cket NUMBERS istrate cict Court t of Appeals	
		Answers to Questions regarding ability to Pay					
ASSETS	EMPLOY- MENT	Are you now employed?			IF NO, give month and year of last employment How much did you earn per month? \$		
		If married is your Spouse employed?			If a minor under age 21, what is your Parents or  Guardian's approximate monthly income? \$		
	OTHER INCOME	Have you received within the past 12 months any income from a bus rent payments, interest, dividends, retirement or annuity payments, o RECEIVED  IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES			usiness, profession or other form of self-employment, or in the form of or other sources? Yes No SOURCES		
	CASH	Have you any cash on hand or money in savings or checking accounts?			? Yes No IF YES, state total amount \$		
	PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other clothing)?			er valuable property (excluding ordinary household furnishings and  DESCRIPTION		
OBLIGATIONS & DEBTS	& DE MO BI (LIS INC)	WIDE SEPA DIVC APARTMEN OR HOME: OR HOME:  LLS t ALL CREDITORS, LUDING BANKS, IN COMPANIES, RIGE ACCOUNTS,	ELE RIED OWED RATED OR ORCED	Total No. of Dependents  Cro	List persons you a	Total Debt  S S S S S S S S S S S S S S S S S S	Monthly Paymt.  S S S S S
I certify under per	nalty of perj	ury that the foregoing is true a SIGNATURE OF DEFEND.	ANT	cuted on (date)			