

22-6494  
No. SC2-905

ORIGINAL

IN THE SUPREME COURT  
OF THE UNITED STATES OF AMERICA

Supreme Court, U.S.  
FILED

OCT 11 2022

OFFICE OF THE CLERK

JESSIE RAYNDLE WELCH

Petitioner /Appellant

v.

STATE OF FLORIDA

Respondents / Appellees

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**AMENDED  
MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

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Jessie Rayndle Welch(*Pro-Se*)  
DC# 470979 / G1-111  
Walton Correctional Institution  
691 Institution Road  
DeFuniak Springs, Fl. 32433

Provided to Walton CI  
On 12-29-22 for Mailing  
Date  
Officer Initials) me Jw

## **MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS***

The petitioner asks for leave to file the attached petition for a writ of certiorari without prepayment of costs and to proceed *in forma pauperis*. The petitioner attests to the following:

1. The petitioner has previously been granted leave to proceed *in forma pauperis* in the following court(s): The Circuit Court of the Judicial Circuit for County; Case No. : and, The District Court of Appeals, State of Florida; Case No. :
2. The petitioner's affidavit or declaration in support of this motion is attached hereto.

Respectfully Submitted,

*Jessie Rayndle Welch*  
/S/ Jessie Rayndle Welch  
Jessie Rayndle Welch  
DC# 470979 / G1-111

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

I, your name 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.

<b>Income source</b>	<b>Average monthly amount during the past 12 months</b>		<b>Amount expected next month</b>	
	<b>You</b>	<b>Spouse</b>	<b>You</b>	<b>Spouse</b>
Employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Self-employment	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Interest and dividends	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Gifts	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Child Support	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Unemployment payments	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

Public Assistance (such as welfare)	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Other (specify); <u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
<b>Total Monthly income</b>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>

2. List your employment history for the past two years, most recent first. (Gross monthly pay is before taxes or other deductions.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross Monthly pay</b>
<u>N/A</u>	<u>      </u>	<u>      </u>	\$ <u>0</u>
<u>N/A</u>	<u>      </u>	<u>      </u>	\$ <u>0</u>
<u>N/A</u>	<u>      </u>	<u>      </u>	\$ <u>0</u>

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.)

<b>Employer</b>	<b>Address</b>	<b>Dates of Employment</b>	<b>Gross Monthly pay</b>
<u>N/A</u>	<u>      </u>	<u>      </u>	\$ <u>0</u>
<u>N/A</u>	<u>      </u>	<u>      </u>	\$ <u>0</u>
<u>N/A</u>	<u>      </u>	<u>      </u>	\$ <u>0</u>

4. How much cash do you or your spouse have? \$ 0  
Below, state any money you or your spouse have in bank accounts or in any other financial institutions.

<b>Type of account (e.g., checking or savings)</b>	<b>Amount you have</b>	<b>Amount your spouse has</b>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishings.

Home	Other real estate	Motor Vehicle #1 Year, make, & model	Motor Vehicle #2 Year, make, & model
Value <u>0</u>	Value <u>0</u>	Value <u>0</u>	Value <u>0</u>
Other assets Description; <u>N/A</u>		Value <u>0</u>	
Value <u>0</u>			

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
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>
<u>N/A</u>	\$ <u>0</u>	\$ <u>0</u>

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
<u>                  </u>	<u>                  </u>	<u>                  </u>
<u>                  </u>	<u>                  </u>	<u>                  </u>
<u>                  </u>	<u>                  </u>	<u>                  </u>

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)	\$ <u>0</u>	\$ <u>0</u>
Are real estate taxes included?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is property insurance included?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

	You	Your spouse
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Home maintenance (repairs and upkeep)	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Food	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Clothing	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Laundry and dry cleaning	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Medical and dental expenses	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Transportation (not including motor vehicle payments)	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Recreation, entertainment, newspapers, magazines etc.	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Life	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Health	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Motor Vehicle	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Other; <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Installment payments		
Motor vehicle	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ
Credit card(s)	\$ <input type="text"/> Ⓛ	\$ <input type="text"/> Ⓛ

	You	Your spouse
Department store(s)	\$ <u>0</u>	\$ <u>0</u>
Other: <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ <u>0</u>
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ <u>0</u>
Other: (specify)	\$ <u>0</u>	\$ <u>0</u>
<b>Total monthly expenses:</b>	\$ <u>0</u>	\$ <u>0</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.

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? 0

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 typist) any money for services in connection with this case, including the completion of this form?

If yes, how much? 0

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

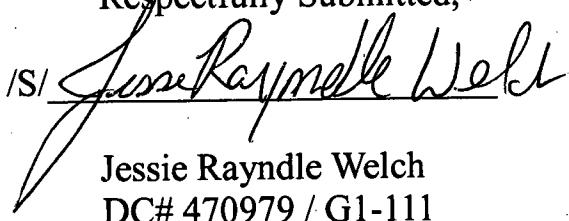
12. Provide any other information that will help explain why you cannot pay the costs of this case.

N/A

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

Respectfully Submitted,

/S/



Jessie Rayndle Welch  
DC# 470979 / G1-111