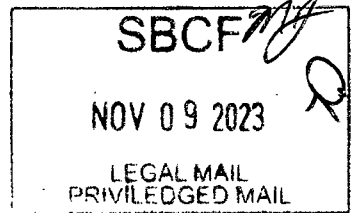


No. 22-7652



IN THE SUPREME COURT OF THE UNITED STATES

MARK A. JONES,

Petitioner,

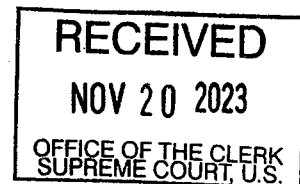
v.

RICKEY D. DIXON,
SECRETARY, FLORIDA DEPARTMENT OF CORRECTIONS,

Respondent.

On Petition for Writ of Certiorari
to the Eleventh Circuit Court of Appeals

**MOTION FOR RECONSIDERATION OF THE ORDER DENYING LEAVE TO
PROCEED IN FORMA PAUPERIS AND ACCEPT TIMELY FILED WRIT OF
CERTIORARI IN 8 ½ BY 11 INCH FORMAT FROM CONFINED INMATE
NOT REPRESENTED BY COUNSEL AS PER RULE 12 AND 21.**

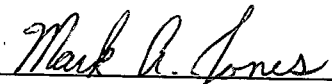


The Petitioner, Mark A. Jones, prays this Court reconsider its previous denial of leave to proceed in forma pauperis. A new motion and affidavit is attached for this Court's review. In support, Petitioner submits the following:

1. Petitioner is incarcerated at South Bay CF without counsel.
2. On May 22, 2023, Petitioner filed a Writ of Certiorari and Motion to Proceed In Forma Pauperis.
3. On October 2, 2023, the Motion to Proceed In Forma Pauperis was denied. Petitioner was given until October 23, 2023 to comply with Rule 33.1 by paying the \$300.00 filing fee and putting the writ in booklet format.
4. On October 20, 2023, Petitioner requested an extension of time to pay the filing fee and that this court accepts his 8 ½ by 11 inch filing without demanding booklet format as he is currently incarcerated and without counsel. Petitioner also submitted a revised affidavit in support of motion to proceed in forma pauperis as his financial situation has changed drastically since his original May 22 submittal.
5. On November 1, 2023, the Clerk, Jeffrey Atkins, granted a time extension without addressing Petitioner's request that his writ be accepted "as is" due to Petitioner's confinement. The Clerk also returned his revised affidavit unaddressed.
6. Petitioner requests this Court reconsider his motion to proceed in forma pauperis in light of his revised affidavit considering his changed financial

circumstance and and his confined status. Petitioner is in prison and it is physically impossible to put this writ in booklet format.

7. In an abundance of caution, a member of Petitioner's church is mailing the \$300.00 filing fee should this Court deny in forma pauperis again. In this instance, Petitioner again requests this Court accept his originally submitted 8 ½ by 11 writ of certiorari as he is a confined inmate without counsel.


Mark A. Jones-E14833

CERTIFICATE OF SERVICE


I HEREBY CERTIFY, a true and correct copy of the foregoing instrument and the

Motion to Proceed In Forma Pauperis with affidavit was furnished to:

Office of Attorney General
4444 Seabreeze Blvd., 5th Floor
Daytona Beach, FL 32118

by first class, pre-paid US mail on this 9th day of November, 2023.

Respectfully submitted,


Mark A. Jones-E14833
South Bay CF
600 US Hwy. 27 South
South Bay, FL 33493

No. 22-7652

IN THE
SUPREME COURT OF THE UNITED STATES

Mark A. Jones — PETITIONER

VS.

Ricky D. Dixon — RESPONDENT

MOTION FOR LEAVE TO PROCEED *IN FORMA PAUPERIS*

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

☒ Petitioner has been previously been granted leave to proceed *in forma pauperis* in the following court(s):

5th District Court of Appeal, Seminole County Circuit, Florida
Federal Middle District

☐ Petitioner has **not** previously been granted leave to proceed *in forma pauperis* in any other court.

Petitioner's affidavit or declaration in support of this motion is attached hereto.

Mark A. Jones
(Signature)

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

I, Mark A. Jones, 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 therefore; and 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 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 expected the past 12 months | | Amount next month | |
|--|--|---------------|----------------------|---------------|
| | You | Spouse | You | Spouse |
| Employment | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Self-employment | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Income from real property (such as rental income) | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Interest and dividends | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Gifts | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Alimony | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Child Support | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Retirement (such as social security, pensions, annuities, insurance) | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Disability (such as social security, insurance payments) | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Unemployment payments | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Public-assistance (such as welfare) | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Other (specify): | \$ <u>Ø</u> | \$ <u>N/A</u> | \$ <u>Ø</u> | \$ <u>N/A</u> |

Total monthly income: \$ 0 \$ N/A \$ 0 \$ N/A

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

| Employer | Address | Dates of Gross Monthly Pay | Employment |
|---------------------|----------|----------------------------|------------|
| <u>Incarcerated</u> | <u></u> | \$ <u></u> | \$ <u></u> |
| <u></u> | <u>↓</u> | \$ <u></u> | \$ <u></u> |
| <u></u> | <u></u> | \$ <u></u> | \$ <u></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.)

| Employer | Address | Dates of Gross Monthly Pay | Employment |
|------------|---------|----------------------------|------------|
| <u>N/A</u> | <u></u> | \$ <u></u> | \$ <u></u> |
| <u></u> | <u></u> | \$ <u></u> | \$ <u></u> |
| <u></u> | <u></u> | \$ <u></u> | \$ <u></u> |

4. How much cash do you and your spouse have? \$ 0

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 |
|-----------------------|-----------------|-----------------|------------------------|
| <u>N/A</u> | <u></u> | \$ <u></u> | \$ <u></u> |
| <u></u> | <u></u> | \$ <u></u> | \$ <u></u> |

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

☐ Home
Value

☐ Other real estate
Value

☐ Motor Vehicle #1
Year, make & model
Value

☐ Motor Vehicle #2
Year, make & model
Value

☐ Other assets
Description

Value _____

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

| Person owing you or | Amount owed to you | Amount owed to your spouse your spouse money |
|---------------------|--------------------|--|
| <u>N/A</u> | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |
| _____ | \$ _____ | \$ _____ |

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

| Name | Relationship | Age |
|------------|--------------|-------|
| <u>N/A</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 of home-mortgage payment (include lot rented for mobile home) 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 | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Utilities (electricity, heating fuel, water, sewer, and telephone) | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Home maintenance (repairs and upkeep) | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Food | \$ <u>Ø</u> | \$ <u>N/A</u> |
| Clothing | \$ <u>Ø</u> | \$ <u>N/A</u> |

| | | |
|--|-------------|--------------------|
| Laundry and dry-cleaning | \$ <u>0</u> | \$ <u>N/A</u> |
| Medical and dental expenses | \$ <u>5</u> | \$ <u>N/A</u> |
| | You | Your spouse |
| Transportation (not including motor vehicle payments) | \$ <u>0</u> | \$ <u>N/A</u> |
| Recreation, entertainment, newspapers, magazines, etc. | \$ <u>0</u> | \$ <u>N/A</u> |

Insurance (not deducted from wages or included in mortgage payments)

| | | |
|-------------------------|-------------|---------------|
| Homeowner's or renter's | \$ <u>0</u> | \$ <u>N/A</u> |
| Life | \$ <u>0</u> | \$ <u>N/A</u> |
| Health | \$ <u>0</u> | \$ <u>N/A</u> |
| Motor Vehicle | \$ <u>0</u> | \$ <u>N/A</u> |
| Other: _____ | \$ <u>0</u> | \$ <u>N/A</u> |

Taxes (not deducted from wages or included in mortgage payments)
(specify): N/A

Installment payments

| | | |
|---------------------|-------------|---------------|
| Motor Vehicle | \$ <u>0</u> | \$ <u>N/A</u> |
| Credit card(s) | \$ <u>0</u> | \$ <u>N/A</u> |
| Department store(s) | \$ <u>0</u> | \$ <u>N/A</u> |
| Other: _____ | \$ _____ | \$ _____ |

| | | |
|--|-------------|---------------|
| Alimony, maintenance, and support paid to others | \$ <u>0</u> | \$ <u>N/A</u> |
|--|-------------|---------------|

| | | |
|--|-------------|---------------|
| Regular expenses for operation of business, profession, or farm (attach detailed statement) | \$ <u>0</u> | \$ <u>N/A</u> |
|--|-------------|---------------|

| | | |
|------------------------|----------|----------|
| Other (specify): _____ | \$ _____ | \$ _____ |
|------------------------|----------|----------|

| | | |
|--------------------------------|-------------|---------------|
| Total monthly expenses: | \$ <u>0</u> | \$ <u>N/A</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? N/A

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

N/A

11. 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 compensation of this form?

☐ Yes ☒ No

If yes, how much? -

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

12. Provide any other information that will help explain why you cannot pay the costs of this case. I have no money. I've been in jail for 13 years, no one will help me. I don't have a bank account
I declare under penalty of perjury that the foregoing is true and correct.

Executed on: November 8, 2023

Mark A. Jones
(Signature)