



Claimant's Name: Takara L Stewart SSN: 260610448 Employer's Name: CVS
Address: 108 E York Street Suite 236 Address: 3210 E Palmetto Street
City: Savannah State: GA Zip: 31401 City: Florence State: SC Zip: 29506
Home Phone: (984) 215- 1812 Work Phone: () - Carrier: XL Insurance America, Inc.
Preparer's Name: Takara L Stewart Preparer's Phone #: () -

RECEIVED
Aug 08 2023
SC Court of Appeals

REQUEST TO WAIVE FILING FEE

1. Are you presently employed? Yes No

a. If yes, state the name and address of your employer and wages below.

Part-time dental assisting, currently no availability since the previous dental assignment.

b. If no, where did you last work, when did you stop working, and what were your wages?

c. Is your spouse employed? Yes No n/a If yes, where? _____

What are your spouse's wages? _____

\$ _____

d. What is the total income of all working members of your household?

2. How many people are dependent on you for their support (include children and relatives)? _____

1

How much do you spend weekly for their support? _____

\$250.00

3. List any money you have received in the past year other than that listed above and state from what source that money came (gift, inheritance, insurance, other).

A rough estimate, more or less, \$10,000.

4. Do you have a checking or savings account? Yes No

If yes, what is the balance in each account?

Checking: \$ 0

Savings: \$ 0

5. Do you rent or own your home? Rent Own

Rent or mortgage payment: \$ 1450.00

6. Do you own a car? Yes No

Payments: \$ 375.00

7. List the names of your creditors and amount of debt.

Bankruptcy, capital one, orthodontia for daughter

To the best of my knowledge, the information above is true and accurate. I have made no attempt to misrepresent my financial condition. I request that the filing fee be waived.

Takara L Stewart
Signature

08/07/2023
Date

For official use only. Fee Waived Waiver Rejected Other Disposition

Chair, S.C. Workers' Compensation Commission

File this form with a Form 30, Application for Commission Review. Refer to R.67-701 through R.67-711 for additional information. File this form with a Form 50, 52, 54, Requests for Motions, Consents and Settlements. Refer to R.67-207, R.67-208, R.67-215, R.67-803 and R.67-805.