

THE SOUTH CAROLINA COURT OF APPEALS

T. Terrell Bryan

Appellant

v.

SCDC

Respondent

Clerk / S.C. Administrative Law Court
Administrative Law Court
Grie No. PCI 1838-12, 0927-12, & 1245-12
ALC Docket No. N/A

IN FORMA PAUPERIS MOTION

I hereby apply for leave to proceed in this action without prepayment of fees or costs or security thereof, in support of my application I declare under penalty of perjury that the following facts are true:

1. I am the Appellant in this action & I believe I am entitled to redress
2. Because of my poverty I am unable to pay the costs of said proceedings or give security thereof, see attached financial Certificate.

Without Prejudice

~~_____~~ all rights reserved

T. Terrell Bryan

Sworn to before Me this

2 day of July 2013

Penny C. Minter (L.S.)

My Commission Expires Jul 28, 2018

RECEIVED

AUG 07 2013

SC Court of Appeals

MCCI
LEGAL MAIL
MAIL ROOM

FINANCIAL CERTIFICATE FOR THE DISTRICT OF SOUTH CAROLINA

(for use in § 1983, Bivens, and non-habeas civil actions filed by prisoners)

I request that an authorized officer of the institution in which I am confined, or other person designated to review financial information in relation to inmate trust funds, complete this Certificate. If I have insufficient funds in my account that prohibit me from paying the full filing fee required by 28 U.S.C. § 1914 (currently \$350.00), I will send with my complaint an initial installment payment, required by 28 U.S.C. § 1915, equal to the amount calculated and entered on line four by the authorized officer signing this form.

I recognize that by filing this case, I am required to pay the full filing fee (or the remaining unpaid portion of the filing fee by installments if necessary) under 28 U.S.C. § 1915(b) even though I am requesting to proceed *in forma pauperis*. I authorize and consent to collection of the filing fee in accordance with 28 U.S.C. § 1915 until the filing fee is paid in full.

| | |
|---|------------------------------------|
| T. Terrell Bryan INMATE NAME (PRINTED) | 254639 INMATE (PRISONER) NUMBER |
| without prejudice MCCI, all rights reserved, INMATE SIGNATURE | MCCI PLACE OF CONFINEMENT |

- ◆ (1) Average monthly deposits to the inmate's account.....\$ 0
- ◆ (2) Average monthly balance in the inmate's account calculated for the prior six months period.\$ 0.18
- ◆ (3) Current Balance\$ 0.18
- ◆ (4) Initial Installment Payment (Take 20 percent of the greater of lines 1 or 2).....\$ 0

I hereby certify that as of this date, the above financial information is accurate for the above named inmate.

| | |
|---|-----------------|
|  Authorized Officer's Signature | 7/18/13 Date |
|---|-----------------|

J. Smith Fin. Adg.
Authorized Officer's Name and Title

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