

The South Carolina  
Court of Appeals

April 29, 2024

Robert Osbey 299910

Case No. 2024-000654

v

South Carolina Department  
of Corrections, Respondent

**RECEIVED**

MAY 03 2024

Notice of Appeal

SC Court of Appeals

I, Robert Osbey # 299910 appeals the decision of  
Honorable Ralph King Anderson April 29<sup>th</sup> 2024.  
Appellant received a copy of this decision on April  
16<sup>th</sup> 2024.

S/ Robert Osbey # 299910

Pro Se

Po Box 580

Una, S.C. 29378

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

I, Robert Henry Osbey, 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.

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

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 Employment	Gross monthly pay
N/A			\$ _____
			\$ _____
			\$ _____

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 Employment	Gross monthly pay
N/A			\$ _____
			\$ _____
			\$ _____

4. How much cash do you and your spouse have? \$ \_\_\_\_\_  
 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
Cooper Trust	Long Term Savings	\$ 1,700	\$ _____
N/A		\$ _____	\$ _____
		\$ _____	\$ _____

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

- 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 your spouse money

Amount owed to you

Amount owed to your spouse

N/A

N/A

N/A

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

Name	Relationship	Age
Tamiya Osbey	daughter	16
Nashya Osbey	daughter	12

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)	\$ _____	\$ _____
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		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ _____	\$ _____
Home maintenance (repairs and upkeep)	\$ _____	\$ _____
Food	\$ _____	\$ _____
Clothing	\$ _____	\$ _____
Laundry and dry-cleaning	\$ _____	\$ _____
Medical and dental expenses	\$ _____	\$ _____

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ _____	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ _____	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ _____	\$ _____
Life	\$ _____	\$ _____
Health	\$ _____	\$ _____
Motor Vehicle	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ _____	\$ _____
Installment payments		
Motor Vehicle	\$ _____	\$ _____
Credit card(s)	\$ _____	\$ _____
Department store(s)	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
Alimony, maintenance, and support paid to others	\$ _____	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ _____	\$ _____
Other (specify): _____	\$ _____	\$ _____
<b>Total monthly expenses:</b>	\$ _____	\$ _____

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? \_\_\_\_\_

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 a typist) any money for services in connection with this case, including the completion 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 been incarcerated for 9 years and haven't worked in P.I. in 2 years no family to depend on parents dead sister in prison other sister on drugs. I'm bere making it I'm recieving hygen bags and all, I really need the court to ~~work~~ waive this fee

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

Executed on: Tue, April 16<sup>th</sup>, 2024



(Signature)

RECEIVED

MAY 03 2024

SC Court of Appeals

Certificate of Service

I, Robert Osbey, hereby certify that on this day April 29<sup>th</sup> 2024 in Unadilla, South Carolina, I served a copy of Notice of Appeal, Administrative Law Courts order of dismissal # 23-ALJ-04-0528-AP, and In Forma Pauperis application in the United States Mail addressed as follows:

General Counsel

Po Box 21787 4444 Broad River Road  
Columbia, S.C. 29221

Administrative Law Court

1205 Pendleton Street Suite 224  
Columbia, S.C. 29201

S/ Robert Osbey # 299910

Pro Se

Po Box 580

Unadilla, S.C. 29378

Robert Osbey 299910 645-A  
Livesey Pre-Release  
Po Box 580  
Union, S.C. 29378

FIRST CLASS



US POSTAGE  
ZIP 29503 \$001.87<sup>0</sup>  
02 7H  
0806024035 APR 26 2024

RECEIVED

MAY 03 2024

SC Court of Appeals

South Carolina Court of Appeals  
Jenny ABBott Kitchens, Clerk  
Po Box 11629  
Columbia, S.C. 29211

SCDC  
APR 30 2024  
MAIL ROOM