



SOUTH CAROLINA
JUDICIAL BRANCH

RECEIVED

JUL 10 2026

STATE OF SOUTH CAROLINA)
COUNTY OF Berkeley)
Chalandra Ross)
Plaintiff,)
vs.)
Barbra McClennon)
Defendant.)

IN THE

Appeals SC Court of Appeals

JUDICIAL CIRCUIT

MOTION AND AFFIDAVIT TO
PROCEED IN FORMA PAUPERIS

FILE NO. _____

Motion for Waiver of Costs and Fees

I, Chalandra Ross am unable to pay the costs of filing and service in the present matter and request that the court waive the costs and allow me to proceed *in forma pauperis*.

Plaintiff submits the following financial declaration and affidavit in support of the above motion.

Address
Age
Occupation
Employer
Employer Address

128 Sterling Ln St. Stephens SC
39
N/A
N/A
N/A

Gross Monthly Income

- 1) Earnings (**attach recent pay stubs**)
- 2) Overtime
- 3) Social Security, VA Benefits,
Workers' Comp or Disability (SSI)
- 4) Unemployment
- 5) Alimony / Child Support (receiving)
- 6) Other (Specify) 0

Total Amount (Add lines 1-6):

Amount:

0
0
0
0
0
0

Assets

- 1) Cash
- 2) Money in Bank Accounts (Checking & Savings)
- 3) IRA / 401k / Pensions
- 4) Other (Specify) 0

Total Amount (Add lines 1-4):

Amount:

0
0
0
0



SOUTH CAROLINA
JUDICIAL BRANCH

Monthly Expenses

- 1) Rent / Mortgage
- 2) Utilities
- 3) Cell phone / Phone
- 4) Food
- 5) Child Support / Alimony (Paying)
- 6) Child Care
- 7) Car Payment
- 8) Car Operating Expenses
(Insurance, gas, maintenance)
- 9) Clothing
- 10) Cable / Satellite TV / Internet
- 11) Medical / Dental / Vision Expenses
- 12) Medical / Dental / Vision Insurance
- 13) Credit Card / Loan Payments
- 14) Other (Specify) _____

Total Amount (Add lines 1-14):

Amount:

450.00
150.00
70
donations
NA
NA
NA
NA
NA
NA
NA
NA
NA
NA
NA
NA

Sworn to before me this _____ day
Of _____, 20 _____

Chalun Reese
Signature of Plaintiff
7/8/26

Notary Public for South Carolina
My Commission Expires: _____

I Receive Assistance from
family and friends to afford
monthly expenses. I'm unable to work
at this time because of personal
Issue. I'm attempting to find a job.