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DEC 31 2013

Dear S. C. SUPREME COURT

S.C. Supreme Court

I do not HAVE a job nor I DO NOT
HAVE Income. I have been granted
Permission to PROCEED in FORMA PAUPERIS
Without Prepayment of FEEs by the
following COURTS.

(1) U.S. DISTRICT CT. SOUTH CAROLINA DIST,
COLUMBIA DIVISION

(2) U.S. DISTRICT CT., SOUTH CAROLINA DIST,
GREENVILLE DIVISION

(3) U.S. DISTRICT CT., Western DISTRICT of N.C.,
CHARLOTTE DIVISION

(4) U.S. 4th CIRCUIT Appeals Ct.
Richmond VIRGINIA

THANK YOU.



LAUREL SANDERS
4005 HIGHWAY 11
Inman, S.C. 29349
(864) 578-0922

CASE NO. 2013 - 002627

IN THE
SUPREME COURT OF SOUTH CAROLINA
COLUMBIA, SOUTH CAROLINA

COURT

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LAUNEL SANDERS - PETITIONER

DEC 31 2013

S.C. Supreme Court

(1) WILLIAM HARDWICKE RHODES of BURT TURNER and RHODES RESPONDENTS

(2) WILLIAM B. DARWIN SPARTANBURG COUNSEL
of HOLCOMBE BOMAR

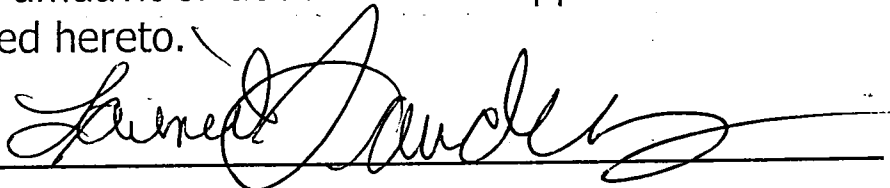
MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

~~X~~ The Petitioner asks leave to file the attached petition without prepayment of costs and to proceed in forma pauperis.

~~X~~ Petitioner has previously been granted leave leave to proceed in forma pauperis in the following Courts:

- (1) U.S. DISTRICT CT, SOUTH CAROLINA DIST, COLUMBIA, S.C.
 - (2) U.S. DISTRICT CT, SOUTH CAROLINA DIST, GREENVILLE DIVISION
 - (3) U.S. DISTRICT CT, Western Dist of N.C., CHARLOTTE DIVISION
- { } Petitioner has **not** previously been granted leave to proceed in forma pauperis.

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



signature

(4) U.S. 4th CIRCUIT APPEALS CT, RICHMOND, VIRGINIA

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

I, LAUNNEIL SANDERS, 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.

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	You		SPOUSE	
	AVERAGE MONTHLY AMOUNT DURING PAST 12 MONTHS		AMOUNT NEXT MONTH	
EMPLOYMENT	300	00	1190	00
SELF-Employment	0	0	0	0
Income from Real Property	0	0	0	0
Interest, Dividends	0	0	0	0
Gifts	0	0	0	0
Alimony	0	0	0	0
Child Support	(- 100	00)	0	0
Retirement	0	00	0	0
Disability	0	00	0	0

You

SPOUSE

INCOME SOURCE	AVERAGE MONTHLY AMOUNT DURING PAST 12 MONTHS	AMOUNT NEXT MONTH
Unemployment	0.00	0.00
Public Assistance	0.00	0.00
Other income	0.00	0.00
TOTAL MONTHLY INCOME	300.00	1200.00

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
NA NONE	-	AM UNEMPLOYED	

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
COOPER AUTOMOTIVE	100 QUALITY WAY Spartanburg, SC 29316	7.2005 to PRESENT	\$1200/MO

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.

Institution Has	Type Acct	Amount You Have	Amount Your Spouse
LAWNEIL SANDERS	CHK	246.50	
JANNETH SANDERS	CHK	246.50	\$246.50

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

Home yes
Value \$ 56500

Other Real Estate NONE
Value _____

Motor Vehicle #1 1997 DODGE RAM
Year, Make & Model 1997 RAM - valued @ \$1000

Motor Vehicle #2 2007 DODGE
Year, Make & Model NITRO DODGE valued @ \$8000

~~Other assets
Description-- NONE
Value---~~

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

Person Owing You Amount Owed to You Amount Owed to Spouse
Or your spouse

1) CEBU UNIVERSAL UNIV HOSPITAL \$7407.00

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

NAME	RELATIONSHIP	AGE
(1) <u>JANNETH SANDERS</u>	<u>SPOUSE</u>	<u>38</u>
(2) <u>ANTONIO EMBERADOR</u>	<u>FATHER IN LAW</u>	<u>71</u>
(3) <u>DOROTHY SANDERS</u>	<u>DAUGHTER</u>	<u>16</u>
(4) <u>COLONEL TONY SANDERS</u>	<u>SON</u>	<u>8</u>
(5) <u>LAUNEIL SANDERS</u>		<u>68</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 or home mortgage (include mobile home lot)	750	00	750	00
Are Real Estate taxes included yes <input checked="" type="checkbox"/> no <input type="checkbox"/>				
Is property insurance included yes <input type="checkbox"/> no <input checked="" type="checkbox"/>				
Utilities	85	00	85	00
Home Maintenance (Repairs, Upkeep)	60	00	60	00
Food	175	00	175	00
Clothing	110	-	95	00
Laundry and Dry-cleaning	35	00	35	00
Medical and Dental Expenses	65	00	65	00
Transportation	35	00	35	00
Recreation, Entertainment, Newspapers	55	00	55	00
Insurance (not deducted from wages or mortgage payments)				
Homeowner's or Renter's	66	00	66	00
Life	125	00	0	0

Health

15 00

275 00

YOU

YOUR SPOUSE

Motor Vehicle

532 00

0 0

Other Insurance-

125 00

60 00

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

Specify----

84 50

84 50

Installment Payments (see above @ MOTOR Vehicle)

Motor Vehicle

-

-

Credit CARDS

0 0

255 00

Department Stores

0 0

110 00

Other—

0 0

0 0

Alimony, maintenance and support to others

0 0

0 0

Regular Business Expenses

35 00

0 0

Other Expenses

71 00

0 0

TOTAL MONTHLY EXPENSES

\$ 2423 50 | \$ 2205 50

