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SUPREME COURT OF SOUTH CAROLINA SUPREME COURT

Appellate Case No.: 2015-002616

KIMMIE SHIPES HEATON

PETITIONER

VS.

STATE OF SOUTH CAROLINA

RESPONDENT

MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

The petitioner asks leave to file the attached petition for a writ of certiorari without payment of cost and to proceed in forma pauperis.

Petitioner has not previously been granted leave to proceed in forma pauperis in any other court.

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

Kimmie Heaton

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

I, Kimmie Heaton, 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 cost 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, semi-annually, 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	\$ 0	\$	\$ 0	\$
Self-Employment	\$ 0	\$	\$ 0	\$
Income from real property	\$ 0	\$	\$ 0	\$
Gifts	\$ 0	\$	\$ 0	\$

Financial Institution Type of Account Amount You Have

N/A

N/A

\$ 0

Amount Your Spouse Has \$ 0

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

Home

value 0

Other Real Estate

value 0

Motor Vehicle #1

Year, Make & Model

Value 0

Motor Vehicle #2

Year, Make & Model

Value 0

Other assets

Description 0 N/A

Value 0

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

Person owing you or

Your spouse money

N/A

Amount owed to you

\$ 0

Amount owed to spouse

\$ 0

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

Name

N/A

Relationship

Age

Income Source	Average Monthly Amount during the Past 12 Months		Amount Expected Next Month	
	YOU	SPOUSE	YOU	SPOUSE
Alimony	\$ 0	\$ _____	\$ 0	\$ _____
Child Support	\$ 0	\$ _____	\$ 0	\$ _____
Retirement	\$ 0	\$ _____	\$ 0	\$ _____
Disability	\$ 0	\$ _____	\$ 0	\$ _____
Unemployment	\$ 0	\$ _____	\$ 0	\$ _____
Public Assistance	\$ 0	\$ _____	\$ 0	\$ _____
Other: Specify _____	\$ 0	\$ _____	\$ 0	\$ _____
Total Monthly Income:	\$ 0	\$ _____	\$ 0	\$ _____

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	N/A	N/A	\$ 0

3. List your spouse's 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 payment
N/A	N/A	N/A	\$ 0

4. How much cash do you and your spouse have? \$ _____

Below, state any money you or your spouse have in a bank accounts or in any financial institution.

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	\$ 0	\$ _____
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	\$ 0	\$ _____
Home Maintenance	\$ 0	\$ _____
Food	\$ 0	\$ _____
Clothing	\$ 0	\$ _____
Laundry and dry cleaning	\$ 0	\$ _____
Medical and dental expenses	\$ 0	\$ _____
Transportation	\$ 0	\$ _____
Recreation	\$ 0	\$ _____
Insurance	\$ 0	\$ _____
Homeowners or renters	\$ 0	\$ _____
Life	\$ 0	\$ _____
Health	\$ 0	\$ _____
Motor Vehicle	\$ 0	\$ _____
Credit cards	\$ 0	\$ _____
Department Stores	\$ 0	\$ _____
other: _____ - N/A	\$ 0	\$ _____

	You	Your spouse
Alimony, maintenance, and support paid to others	\$ 0	\$
Regular expenses for operation of business, profession, or farm	\$ 0	\$
Other:	\$ 0	\$
Total monthly expenses:	\$ 0	\$

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 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 person'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 cost of this case.

I am an indigent inmate in the state of South Carolina.

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

Executed on: January 12, 2016

Kimmiie Heaton