

STATE OF SOUTH CAROLINA IN THE COURT OF APPEALS
Appeal From Williamsburg County - George C. James, JR.
CIRCUIT COURT Judge

THE S.C. COURT OF APPEALS
Clerk JENNY ABBOTT KITCHINGS
P.O. BOX 11629
Columbia, S.C. 29211

RECEIVED

JUL 27 2016

SC Court of Appeals

1 JUL 21 2016

RE: STATE VS. ARTHUR R. MOSELEY AKA SHAHID MAJID
C/N: 2014-000199

DEAR CLERK JENNY ABBOTT KITCHINGS:

MAY THE LORD GOD OF ABRAHAM BLESS YOU, FAMILY AND STAFF.
PLEASE FORWARD TO ME AT Below ADDRESS THE NAME OF THE
COURT REPORTER whom Presided Over Title, JUNE 8th 2016,
"ORAL ARGUMENT." INFORMATION IS NEEDED TO OBTAIN TRANSCRIPT
OF HEARING VIA 28 U.S.C.A §1915 PROCEEDING IN FORMA PAUPERIS (A)(2)(H)
A COPY OF FINANCIAL CERTIFICATE BY SCOC, M. BOYKIN - FINANCIAL ACCT.
VALIDATES 16/28/16, INDIGENCY, SEE EXH. A-C IN ACCORD WITH 28 U.S.C.A §1915
(A)(B)(a). Please RETURN WITH NAME AND ADDRESS OF COURT REPORTER
- ORDER - GRANTING WAIVER OF WAS Fee FOR TRANSCRIPT.

Respectfully submitted,

CERTIFICATE OF SERVICE/

Shahid Majid

I ATTEST ON Below DATE COPY OF LETTER TO CLERK KITCHINGS FOR COURT REPORTER
INFO. HAS BEEN MAILED ON Below DATE. I ASK CLERK FOR CHECKED STAMPED
COPY BE MAILED TO ME AT Below ADDRESS. ON THIS, 22, DAY OF JULY, 2016

Shahid Majid

SHAHID MAJID #199398, ADA
107 P.O. BOX 205 E.A 50#
Ridgeville, S.C. 29472

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JUN 17 2016

MAILROOM
LIEBER CI

EXM.A.1

FINANCIAL CERTIFICATE
FOR THE
DISTRICT OF SOUTH CAROLINA

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

JUN 30 2016

MAILROOM
LIEBER CI

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.

AKA
Name

ARTHUR MOSELEY AND-PROSE
INMATE NAME (PRINT)

#199398
INMATE (PRISONER) NUMBER

EA 50

Arthur Moseley
INMATE SIGNATURE

DORCHESTER COUNTY
PLACE OF CONFINEMENT

- ◆ (1) Average monthly deposits to the inmate's account.....s 4.52
- ◆ (2) Average monthly balance in the inmate's account calculated for the prior six months period.....s 4.59
- ◆ (3) Current Balances 1.52
- ◆ (4) Initial Installment Payment (Take 20 percent of the greater of lines 1 or 2).....s 0

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

M. Boykin
Authorized Officer's Signature

6/28/16
Date

M. Boykin Financial Acct
Authorized Officer's Name and Title

5800 FINANCIAL ACCTG.
2016 JUN 23 PM 3:30
PH 2:29

SHANID MATIN #199398-ADA

L.C.T. P.O. BOX 205 EA 50#

Ridgeville, S.C. 29478

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JUL 22 2016

MAILROOM
LETT CI

The S.C. COURT OF APPEALS

CLERK OF COURT - JENNY ABBOTT KITCHINGS

P.O. BOX 11629 - Columbia, S.C. 29211

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