

Melisa W. Gay, LLC  
Attorney and Counselor at Law

Melisa W. Gay

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June 26, 2017

Clerk of Court  
South Carolina Court of Appeals  
P.O. Box 11629  
Columbia, SC 29211

RECEIVED  
JUN 28 2017  
SC Court of Appeals

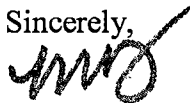
**RE: The State, Respondent v. Gerald Jarrod Ancrum, Appellant  
Appellate Case No.: 2017-001335**

Dear Madam Clerk:

I am respectfully requesting an additional thirty days to request a transcript in Mr. Ancrum's case.

I have enclosed a copy of Mr. Ancrum's Affidavit of Indigency. We are sending an application for representation to the Office of Appellate Defense. As soon as Appellate Defense receives the application I anticipate he will qualify for representation.

Sincerely,



Melisa W. Gay

Enclosure

cc: Ms. Rhonda Foxworth  
South Carolina Office of Appellate Defense

Immato #  
267401

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF CHARLESTON )

AFFIDAVIT OF INDIGENCY

State vs. Gerald Jarrod Ancrum

Criminal Case No.: 2015-GS-10-02972; 2015GS-10-02973

Current Address: 860 Trent St.

Are you incarcerated? YES

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SC Court of Appeals

What are you convicted of? Heroin

What was your sentence? 15 yrs.

In what county was this hearing held? USA

Presiding Judge's name? Keesley

Date of Hearing? MAY

Are you appealing from a trial, guilty plea or from a post-conviction relief hearing?

Trial

Were you represented by a court-appointed attorney, public defender, or retained counsel?

Retained Counsel

Name of Attorney/Public Defender? Melisa W. Gay

If retained, how much did you pay for attorney's fee? \$ 2,000

If you still owe money to your attorney, how much? \$ 3,000

1. Are you presently employed? NO

a. If "yes", state the amount of your salary or wages per month, and give the name and address of your employer. N/A

b. If "no", state the name and address of last employment, date of termination of employment, and amount of your salary or wages per month. Butler LANDSCAPING  
450 monthly

2. List by name, age and relationship to you, any persons who are dependent upon you for support. Indicate beside each how much you contribute toward their support.

NONE

3. Have you received within the past twelve months any money from any of the following sources?

a. Business, profession or form of self-employment?

NO

b. Rent payments, interest or dividends?

NO

c. Pensions, annuities or life insurance payments?

NO

d. Gifts or inheritance?

NO

e. Any other sources?

NO

If the answer to any of the above is "yes", describe each source of money and state the amount received from each during the past twelve months. \_\_\_\_\_

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4. Do you own cash, or do you have any money in a checking or savings account?

NO

If the answer is "yes", state the total amount of the case owned.

5. Do you own any real estate, stocks, bonds, notes or other valuable property (excluding ordinary household furnishings and clothing)?

NO

If the answer is "yes", describe the property and state the appropriate value of the items owned. \_\_\_\_\_

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6. What kind of motor vehicle do you own?

Is it paid for? None

If not, what are the monthly payments?

7. How much do you owe (on liens, mortgages, other encumbrances or debts)?

None

I do solemnly swear that the account by me delivered into this Court does contain a true and full account of all my real and personal estate, debts, credits and effects whatsoever without exception, which I, or any person in trust for me, have or at the time of my possession had, or am, or was, in respect, entitled to, in possession, remainder or reversion and that I have not at any time since charges were made against me or before, directly or indirectly sold, leased assigned or otherwise disposed of or made over, in trust for myself or otherwise, other than is mentioned herein.

I understand that the State shall file a claim against me in an amount equal to the cost of representation, but that such claim shall not constitute a lien against my property, unless, the claim is reduced to judgment by the Order of the Court after giving me at least thirty (30) day's notice.

Under penalty of perjury, I certify that the information given by me on this affidavit is true and correct, and I understand that I will be subject to civil and/or criminal penalties if I knowingly furnish false information.

I am financially unable to employ counsel.

This 23<sup>rd</sup> day of June, 2017.

X Gerald Ancrum  
Gerald Jarrod Ancrum, Defendant

I understand that I am entitled to at least thirty (30) days notice before a claim against me may be reduced to judgment, and I do hereby waive the right to such notice.

This 23<sup>rd</sup> day of June, 2017.

X Gerald Anon  
Defendant

SUBSCRIBED AND SWORN to before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 2017

[Signature]  
NOTARY PUBLIC FOR SOUTH CAROLINA  
My Commission Expires: June 8, 2027.

**Melisa W. Gay, LLC**

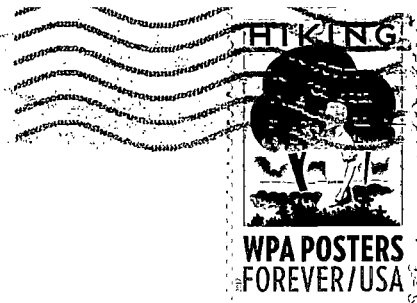
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CHARLESTON SC 294

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