

UNITED STATES DISTRICT COURT
for the
DISTRICT OF SOUTH CAROLINA

Vivian M Woods, as)
Personal Representative of the Estate of)
Deborah E. Woods and individually,)
)
Appellant,)

Case No. 2013-CP-07-0660

v.)

Roosevelt Rawlins and Sharon)
Miller Young,)

Respondent(s)

RECEIVED
AUG 27 2018
SC Court of Appeals

**AFFIDAVIT ACCOMPANYING MOTION
FOR PERMISSION TO APPEAL IN FORMA PAUPERIS**

Affidavit in Support of Motion	Instructions
<p>I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C. § 1621.)</p>	<p>Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.</p>
<p>Signed: <u>Vivian M Woods</u></p>	<p>Date: <u>8/23/18</u></p>

My issues on appeal are: I. Final Order Granting Summary Judgment to the Respondents/Defendants, II. Order on Plaintiffs' Motion to Reconsider In Part and III. Order Denying Plaintiffs' Motion for Summary Judgment.

1. *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.*

Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 49	\$ 0
Home maintenance (repairs and upkeep)	\$ 0	\$ N/A
Food	\$ 192	\$ N/A
Clothing	\$ 0	\$ N/A
Laundry and dry-cleaning	\$?	\$ N/A
Medical and dental expenses	\$ 0	\$ N/A
Transportation (not including motor vehicle payments)	\$ 0	\$ N/A
Recreation, entertainment, newspapers, magazines, etc.	\$ 0	\$ N/A
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's:	\$ 0	\$ N/A
Life:	\$ 74	\$ N/A
Health:	\$ 0	\$ N/A
Motor vehicle:	\$ 0	\$ N/A
Other:	\$ 0	\$ N/A
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$ 0	\$ N/A
Installment payments		
Motor Vehicle:	\$ 0	\$ N/A
Credit card (name):	\$ 0	\$ N/A
Department store (name):	\$ 0	\$ N/A
Other:	\$ 0	\$ N/A
Alimony, maintenance, and support paid to others	\$ 0	\$ N/A
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ 0	\$ N/A
Other (specify):	\$ 0	\$ N/A
Total monthly expenses:	\$ 315	\$ N/A

RECEIVED

AUG 27 2018

SC Court of Appeals

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0	\$ N/A	\$ 0	\$ N/A
Self-employment	\$ 0	\$ N/A	\$ 0	\$ N/A
Income from real property (such as rental income)	\$ 0	\$ N/A	\$ 0	\$ N/A
Interest and dividends	\$ 0	\$ N/A	\$ 0	\$ N/A
Gifts	\$ 0	\$ N/A	\$ 0	\$ N/A
Alimony	\$ 0	\$ N/A	\$ 0	\$ N/A
Child support	\$ 0	\$ N/A	\$ 0	\$ N/A
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ N/A	\$ 0	\$ N/A
Disability (such as social security, insurance payments)	\$ 0	\$ N/A	\$ 0	\$ N/A
Unemployment payments	\$ 0	\$ N/A	\$ 0	\$ N/A
Public-assistance (such as welfare)	\$ 0	\$ N/A	\$ 0	\$ N/A
Other (specify):	\$ 0	\$ N/A	\$ 0	\$ N/A
Total monthly income: Did not have monthly income	\$ 0	\$ N/A	\$ 0	\$ N/A

2. List your 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
Island Packet	10 Buck Island Rd Bluffton, SC 29910	5/08 - 2/18	\$ 1981
N/A	N/A	N/A	\$ 0
N/A	N/A	N/A	\$ 0

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
N/A	N/A	N/A	\$ 0
N/A	N/A	N/A	\$ 0
N/A	N/A	N/A	\$ 0

4. How much cash do you and your spouse have? \$ 23

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

Financial Institution	Type of Account	Amount you have	Amount your spouse has
HUD Fed Credit	Checking	\$ 20	\$ 0
Sun Trust	Checking	\$ -651.00	\$ 0
Sun Trust	Savings	\$ 16	\$ 0

If you are a prisoner seeking to appeal a judgment in a civil action or proceeding, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

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

Home	Other real estate	Motor vehicle #1
(Value) \$ 0	(Value) \$ 0	(Value) \$ 200
N/A	N/A	Make and year: Buick 04
		Model: Century
		Registration #: JID194

RECEIVED
AUG 27 2018
SC Court of Appeals

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 an attached sheet.

10. Have you spent — or will you be spending — any money for expenses or attorney fees in connection with this lawsuit? Yes No

If yes, how much? \$ _____

11. Provide any other information that will help explain why you cannot pay the docket fees for your appeal. No income right now.

12. State the city and state of your legal residence.

Your daytime phone number: (843) 338-3679

Your age: 52 Your years of schooling: 18

Last four digits of your social-security number: 4482

RECEIVED
AUG 27 2018
SC Court of Appeals

STATE OF SOUTH CAROLINA)

2013-CP-07-00660

CIVIL CASE NUMBER

COUNTY OF BEAUFORT)

COURT OF COMMON PLEAS

DEBORAH E WOODS)

P O Box 21723)

Hilton Head Island, SC 29925)

Plaintiff(s),)

Vs.)

SHARON MILLER YOUNG)

37A WILD HORSE RD)

5 Bligen Lane)

Hilton Head Island, SC 29926)

Defendant(s).)

**ORDER TO
PROCEED IN FORMA PAUPERIS**

2015 JUL 16 4:30 PM
BEAUFORT COUNTY, S.C.
COURT CLERK

ORDER

- Leave is granted to proceed in forma pauperis without payment of the filing fee.
- Leave is granted to proceed in forma pauperis without payment of the service cost.
- Leave is granted to proceed in forma pauperis without payment of the reference fee.
- Leave is denied to proceed in forma pauperis.

Dated: 7-16, 2015

JUDGE/CLERK OF COURT

Beaufort

, South Carolina

NOTICE TO PLAINTIFF: The Court may assess costs against either party at hearing.

RECEIVED

AUG 27 2018

SC Court of Appeals