

STATE OF SOUTH CAROLINA
IN THE COURT OF APPEALS

APPEAL FROM THE ADMINISTRATIVE LAW COURT

HONORABLE CAROLAN C. MATTHEWS
ADMINISTRATIVE LAW JUDGE

APPELLATE CASE NO: 2013-000761

ALC DOCKET NO: 12-ALJ-04-0746-AP

TRACY CARTER

APPELLANT

VS

SC DEPT OF CORRECTIONS

RESPONDENT

MOTION AND AFFIDAVIT FOR LEAVE TO PROCEED IN FORMA PAUPERIS

PURSUANT TO EX PARTE LEXINGTON COUNTY 442 SE2D 589 LONG V IOWA 87 SCLT 362 GRIFFIN V ILL-INDIS 76 SCLT 585 LANE V BROWN 83 SCLT 768 WILLIAMS V ST LOUIS COUNTY 812 F2D 1079 APPELLANT DUE TO INDIGENCY MOVES TO PROCEED WITHOUT PREPAYMENT OF FILING FEE IN THIS MATTER (SEE SCLC FINANCIAL CERTIFICATE ATTACHED)

OTHER COUNSEL OF RECORD:

CHRISTOPHER D. FLORIAN
4444 BADEN RIVER RD
COLUMBIA SC 29221

RECEIVED

APR 19 2013

SC Court of Appeals

S/ Tracy Carter
2473871 BB38
4848 GORDON HWY
KENNESAW SC 29067

Kershaw
PB38

FINANCIAL CERTIFICATE
FOR THE
DISTRICT OF SOUTH CAROLINA
(for use in § 1983, *Bivens*, and non-habeas civil actions filed by prisoners)

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, 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.

TRACEY CARTER
INMATE NAME (PRINTED)

247387
INMATE (PRISONER) NUMBER

Tracey Carter
INMATE SIGNATURE

Kershaw
PLACE OF CONFINEMENT
KERSHAW

◆ (1) Average monthly deposits to the inmate's account.....\$ 0.01

◆ (2) Average monthly balance in the inmate's account calculated for the prior six months period.\$ 15.12

◆ (3) Current Balance\$ 15.15

◆ (4) Initial Installment Payment (Take 20 percent of the greater of lines 1 or 2).....\$ 0
**\$15 to freeze*

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

J. Smith
Authorized Officer's Signature
J. Smith F.M. Act.
Authorized Officer's Name and Title

3/28/13
Date

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S. C. D. C.

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PROOF OF SERVICE
COURT OF APPEALS

THIS IS CERTIFICATION THAT I SERVED THE FOLLOWING PARTIES WITH A COPY OF MOTION AND AFFIDAVIT FOR LEAVE TO PROCEED IN FORMA PAUPERIS ON APRIL 17TH 2013 BY PLACING A COPY OF SAME IN THE U.S. MAIL POSTAGE PREPAID ADDRESS:

CHRISTOPHER D. FLORIAN
4444 BROAD RIVER RD
COLUMBIA SC 29221

HONORABLE JENNIFER KITCHINGS
P. O. BOX 11629
COLUMBIA SC 29211

s/ Tracey Carter