

20-7161

IN THE  
SUPREME COURT OF THE UNITED STATES

ORIGINAL

TYRELL E. ARTIS,

Petitioner-Movant,

:  
Case No:

-VS-

: ORIGINAL ACTION IN CERTIORARI

STATE OF OHIO/CITY OF BELLEFONTAINE,

:

Respondent,

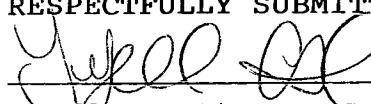
: MOTION FOR LEAVE

PETITIONER'S MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

Now comes the Petitioner-Movant, Tyrell E. Artis, Pro-Se, Who hereby moves this Honorable Court for leave to file attached Petition for a Writ of Certiorari without prepayment of costs and to proceed in forma pauperis.

Petitioner has attached hereto an Affidavit of Indigency, and a copy of the last six months of his inmate trust account (Certified). Further, the Petitioner has filed an Affidavit of Indigency within the Ohio Supreme Court to file his Discretionary appeal, in which the Clerk of Courts accepted (See attached). Petitioner asserts he is entitled to redress, thus he respectfully ask for leave to proceed in Forma Pauperis.

RESPECTFULLY SUBMITTED,

  
Tyrell E. Artis, Pro-Se,  
Petitioner-Movant,

Inmate: A746-808  
P.O BOX: 1812  
Marion, Ohio 43301-1812.

Supreme Court, U.S.  
FILED

FEB 16 2021

OFFICE OF THE CLERK

RECEIVED  
FEB 16 2021  
OFFICE OF THE CLERK  
SUPREME COURT, U.S.

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

I, TYRELL E. ARTIS, 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 costs of this case or to give security therefor; and I believe I am entitled to redress.

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.

Income source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Self-employment	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Interest and dividends	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Gifts	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Alimony	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Child Support	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Unemployment payments	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Other (specify): <u>STATE PAY</u>	\$ <u>18.00</u>	\$ <u>N/A</u>	\$ <u>18.00</u>	\$ <u>N/A</u>
<b>Total monthly income:</b>	<b>\$ <u>18.00</u></b>		<b>\$ <u>18.00</u></b>	

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
<u>INCARCERATED</u>	_____	_____	\$_____
	_____	_____	\$_____
	_____	_____	\$_____

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
<u>N/A</u>	_____	_____	\$_____
	_____	_____	\$_____
	_____	_____	\$_____

4. How much cash do you and your spouse have? \$ 0 0 0

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

Type of account (e.g., checking or savings)	Amount you have	Amount your spouse has
<u>N/A</u>	\$_____	\$_____
	\$_____	\$_____
	\$_____	\$_____

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

Home

Value N/A

Other real estate

Value N/A

Motor Vehicle #1

Year, make & model N/A

Motor Vehicle #2

Year, make & model N/A

Value \_\_\_\_\_

Value \_\_\_\_\_

Other assets

Description N/A

Value \_\_\_\_\_

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

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
<u>N/A</u>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

7. State the persons who rely on you or your spouse for support. For minor children, list initials instead of names (e.g. "J.S." instead of "John Smith").

Name	Relationship	Age
<u>N/A</u>	_____	_____
_____	_____	_____
_____	_____	_____

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 (include lot rented for mobile home)	\$ <u>8</u>	\$ <u>8</u>
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 (electricity, heating fuel, water, sewer, and telephone)	\$ <u>8</u>	\$ _____
Home maintenance (repairs and upkeep)	\$ <u>0</u>	\$ _____
Food	\$ <u>8</u> - <u>\$100.00</u>	\$ _____
Clothing	\$ _____	\$ _____
Laundry and dry-cleaning / <u>hygiene</u>	\$ <u>10.00+</u>	\$ _____
Medical and dental expenses	\$ <u>2.00+</u>	\$ _____
	CO-PAY	

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ <u>0</u>	\$ _____
Recreation, entertainment, newspapers, magazines, etc.	\$ <u>0</u>	\$ _____
Insurance (not deducted from wages or included in mortgage payments)		
Homeowner's or renter's	\$ <u>0</u>	\$ _____
Life	\$ <u>0</u>	\$ _____
Health	\$ <u>0</u>	\$ _____
Motor Vehicle	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____
Taxes (not deducted from wages or included in mortgage payments)		
(specify): _____	\$ <u>0</u>	\$ _____
Installment payments		
Motor Vehicle	\$ <u>0</u>	\$ _____
Credit card(s)	\$ <u>0</u>	\$ _____
Department store(s)	\$ <u>0</u>	\$ _____
Other: _____	\$ <u>0</u>	\$ _____
Alimony, maintenance, and support paid to others	\$ <u>0</u>	\$ _____
Regular expenses for operation of business, profession, or farm (attach detailed statement)	\$ <u>0</u>	\$ _____
Other (specify): <u>Phone calls - contact with family</u>	\$ <u>6.00</u>	\$ _____
<b>Total monthly expenses:</b>	<u>\$ 18.00 (+)</u>	\$ _____

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. -DUE TO COVID-19

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 attorney'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? \_\_\_\_\_

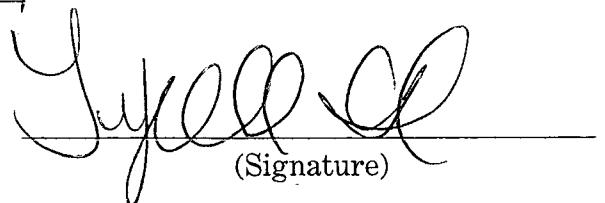
If yes, state the person's name, address, and telephone number:

12. Provide any other information that will help explain why you cannot pay the costs of this case.

DUE TO COVID-19, MY FAMILY HAS LOST THEIR EMPLOYMENT AND  
OUR STRUGGLING TO SURVIVE, AND TO SEND MONEY TO COVER THE COSTS  
OF PRISON PHONE CALLS, E-MAILS, PICTURES, ETC.

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

Executed on: February 3, 2021

  
(Signature)

**AFFIDAVIT OF INDIGENCY**  
**TYRELL E. ARTIS**

STATE OF OHIO ]  
] SS; In Support of Motion for leave to Proceed in Forma Pauperis  
MARION COUNTY ]

I, Tyrell E. Artis, 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 costs of this case or to give security therefor; and I believe I am entitled to redress.

1: I am currently incarcerated within the Ohio Department of Rehabilitation and Corrections ("ODRC"), confined at; North Central Correctional Complex, 670 Marion-Williamsport Road East, P.O BOX 1812, Marion, Ohio 43301-1812. Pursuant to the conviction and sentence imposed upon me by Logan County Common Pleas;

2: That I earn a meager \$18/00 a month in my prison employment;

3: That I have no assets, equity, property, real-property, public assistance, and or items of any value at this time in which would cover the costs of this action herein;

4: That I have proceeded "Pro-Se" within the appeal process of this criminal case, in which is the subject of this action;

5: Due to COVID-19, the financial gifts I was receiving from my family, will not be continuing due to losing their employment, due to the pandemic;

6: Further, That, I, Tyrell E. Artis, Affiant herein, says Naught.

RESPECTFULLY SUBMITTED,



Tyrell E. Artis, Pro-Se,  
Petitioner-Affiant,

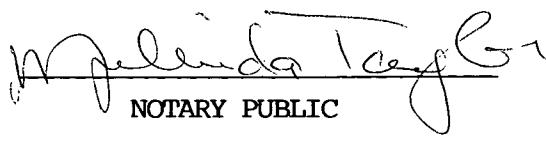
Inmate: A746-808  
P.O BOX: 1812  
Marion, Ohio 43301-1812;

I declare under penalty of perjury that the foregoing is true and correct, in which the foregoing was deposed under oath on this 12 day of January, 2021.



MELINDA TAYLOR  
Notary Public  
State of Ohio  
My Commission Expires

5-17-22



NOTARY PUBLIC

Exhibit

AFFIDAVIT OF INDIGENCY  
TYRELL E. ARTIS

STATE OF OHIO ]  
] SS;  
MARION COUNTY ]

20-1110

I, Tyrell E. Artis, Affiant herein, Having been duly sworn and cautioned as to the penalty's for perjury, hereby depose and swear upon the following;

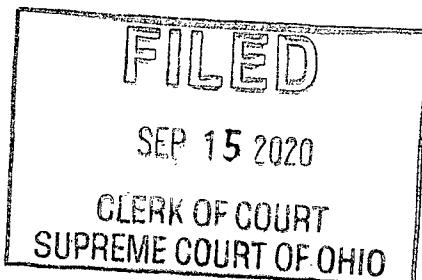
- 1: That I am incarcerated at; North Central Correctional Complex, 670 Marion-Williamsport Road East, P.O BOX 1812, Marion, Ohio 43301-1812. Pursuant to the conviction and sentence imposed upon me by Logan County Common Pleas;
- 2: That I earn a meager \$18.00 monthly in my prison employment;
- 3: That as a result of this incarceration, I have no funds that can and or will cover the costs of this action, I further have no bank accounts, bonds, savings, equity, and or real property that can and will cover the costs of this action;
- 4: That, Pursuant to Supreme Court Rule §3.06, of the Rules of Practice of the Supreme Court of Ohio, I am requesting that the filing fee and security deposit, if applicable, be waived;
- 5: That I am a true pauper according to the Laws of the United States of America, and the State of Ohio;
- 6: And that, I Tyrell E. Artis, Affiant herein, says Naught.

RESPECTFULLY SUBMITTED,



Tyrell E. Artis, Pro-Se,  
Appellant-Affiant,

Inmate: A746-808  
P.O BOX: 1812  
Marion, Ohio 43301-1812.



The foregoing Affidavit of Indigency was deposed under oath in my presence on this 3 day of September, 2020.



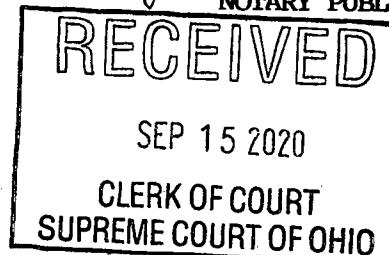
MELINDA TAYLOR

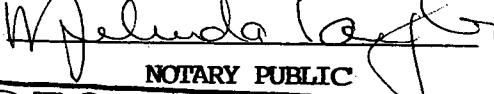
Notary Public

State of Ohio

My Commission Expires

5-17-22



  
NOTARY PUBLIC

Exhibit

KARLA STEVENS, CLERK  
BELLEFONTEAINE  
MUNICIPAL COURT

**AFFIDAVIT OF INDIGENCY**

STATE OF OHIO )  
COUNTY OF MARION )  
                         )SS:

2019 OCT 29 PM 2:53

FILED

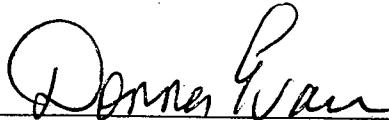
I, Tyrell E. AHD, 746-808, having been first duly sworn and cautioned as to the penalties for perjury, hereby deposes and says the following:

1. That I am incarcerated at the North Central Correctional Institution, 670 Marion Williamsport Road East, Marion [Marion Ohio], Ohio 43302, pursuant to the ~~conviction~~ and sentence imposed upon me by the Court of Common Pleas of Logan County, Ohio;
2. That I earn \$ 17.00 monthly in my prison employment;
3. That as a result of this incarceration, I have no money to pay for representation or secure costs in this matter;
4. That I have no bank accounts, bonds, real property or equity therein In which to satisfy the costs of maintaining this action;
5. That I am a true pauper according to the laws of the State of Ohio and of the United States of America;
6. And further, Tyrell E AHD, 746-808, Affiant herein, says naught.

  
Affiant

**PUBLIC NOTARY**

Sworn to and subscribed before me in my presence this 23 day of October,  
2019.

  
\_\_\_\_\_  
Notary Public

DONNA EVANS  
NOTARY PUBLIC • STATE OF OHIO  
Recorded in Crawford County  
My commission expires Feb. 12, 2024

My commission expires: 2-12-24

01/03/2021

MTC

## Inmate Demand Statement

"I CERTIFY THIS DOCUMENT IS A TRUE AND ACCURATE ACCOUNT OF THE INMATE'S FINANCIAL RECORD ON FILE IN MY OFFICE."  
*Rose West* 1.3.2021  
 ACCOUNT CLERK  
 CASHIER'S OFFICE  
 Number: A746808

Inmate Name: ARTIS, TYRELL E  
 Lock Location: NCCC, MO, A,,, 0077

Date Range: 06/01/2020 Through 01/01/2021

## Beginning Account Balances:

	Saving	Debt	Payable		Saving	Debt	Payable
Inmate's Perso	\$106.27	\$0.00	\$0.00	Inmate's Personal	\$7.31	\$0.00	\$0.00
<b>Begin Totals</b>	<b>\$106.27</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>End Totals</b>	<b>\$7.31</b>	<b>\$0.00</b>	<b>\$0.00</b>

Transaction Date / Inst.	Transaction Amount	Description	Comment	Saving Balance	Debt Balance	Payable Balance
06/01/2020	(\$15.00)	Inmate's Personal Account	POS Exemption Transfer	\$91.27	\$0.00	\$0.00
NCCC						
06/01/2020	\$15.00	Pos Exemption	POS Exemption Transfer	\$106.27	\$0.00	\$0.00
NCCC						
06/02/2020	\$50.00	OffConnect Kiosk Deposit	8245398709155145061/Johnson, Kaylee	\$156.27	\$0.00	\$0.00
NCCC						
06/04/2020	(\$132.55)	Commissary Sale	Ticket Number 453915	\$23.72	\$0.00	\$0.00
NCCC						
06/05/2020	\$18.00	State Pay	State Pay	\$41.72	\$0.00	\$0.00
NCCC						
06/12/2020	(\$41.19)	Commissary Sale	Ticket Number 455186	\$0.53	\$0.00	\$0.00
NCCC						
06/17/2020	\$5.00	Incentive Pay	May, 2020 - idf incentive pay	\$5.53	\$0.00	\$0.00
NCCC						
06/22/2020	\$50.00	OffConnect Kiosk Deposit	8268652004434781473/Artis, Ashia	\$55.53	\$0.00	\$0.00
NCCC						
06/26/2020	(\$55.51)	Commissary Sale	Ticket Number 457394	\$0.02	\$0.00	\$0.00
NCCC						
07/01/2020	\$0.00	\$15.00 Reservation to Pos Exemption	Odrcc Pos Exemption	\$0.02	\$0.00	\$0.00
NCCC						
07/02/2020	\$50.00	OffConnect Kiosk Deposit	8278231891843753249/Artis, Ashia	\$50.02	\$0.00	\$0.00
NCCC						
07/02/2020	(\$40.93)	Commissary Sale	Ticket Number 458511	\$9.09	\$0.00	\$0.00
NCCC						

07/02/2020	\$18.00 State Pay	State Pay	\$27.09	\$0.00	\$0.00
NCCC					
07/06/2020	\$30.00 OffConnect Kiosk Deposit	8290281478829909279/Art is, Ashia	\$57.09	\$0.00	\$0.00
NCCC					
07/06/2020	(\$57.02) Commissary Sale	Ticket Number 458892	\$0.07	\$0.00	\$0.00
NCCC					
07/19/2020	\$50.00 OffConnect Kiosk Deposit	8313290637548463461/La ckey, Calyssa	\$50.07	\$0.00	\$0.00
NCCC					
07/19/2020	\$50.00 OffConnect Kiosk Deposit	8313554574764418406/Art is, Ashia	\$100.07	\$0.00	\$0.00
NCCC					
07/21/2020	(\$64.90) Commissary Sale	Ticket Number 461116	\$35.17	\$0.00	\$0.00
NCCC					
07/27/2020	\$25.00 OffConnect Kiosk Deposit	8317394927204443423/Matthews , Brandon	\$60.17	\$0.00	\$0.00
NCCC					
07/28/2020	(\$60.13) Commissary Sale	Ticket Number 462344	\$0.04	\$0.00	\$0.00
NCCC					
08/01/2020	\$0.00 \$15.00 Reservation to Pos Exemption	Odrc Pos Exemption	\$0.04	\$0.00	\$0.00
NCCC					
08/05/2020	\$50.00 OffConnect Kiosk Deposit	8338883148715140383/Art is, Ashia	\$50.04	\$0.00	\$0.00
NCCC					
08/05/2020	(\$49.74) Commissary Sale	Ticket Number 463869	\$0.30	\$0.00	\$0.00
NCCC					
08/05/2020	(\$0.10) Commissary Sale	Ticket Number 463870	\$0.20	\$0.00	\$0.00
NCCC					
08/07/2020	\$18.00 State Pay	State Pay	\$18.20	\$0.00	\$0.00
NCCC					
08/13/2020	\$40.00 OffConnect Kiosk Deposit	8350549317897430373/La ckey, Calyssa	\$58.20	\$0.00	\$0.00
NCCC					
08/13/2020	\$30.00 OffConnect Kiosk Deposit	8350592347681596705/Matthews , Brandon	\$88.20	\$0.00	\$0.00
NCCC					
08/14/2020	(\$80.86) Commissary Sale	Ticket Number 464919	\$7.34	\$0.00	\$0.00
NCCC					
08/15/2020	\$100.00 OffConnect Kiosk Deposit	8351309816465466726/Art is, Ashia	\$107.34	\$0.00	\$0.00
NCCC					
08/26/2020	(\$92.48) Commissary Sale	Ticket Number 466230	\$14.86	\$0.00	\$0.00

NCCC					
08/29/2020	\$30.00 OffConnect Kiosk Deposit	8371324561801094431/La ckey, Calyssa	\$44.86	\$0.00	\$0.00
NCCC					
09/01/2020	(\$15.00) Inmate's Personal Account	POS Exemption Transfer	\$29.86	\$0.00	\$0.00
NCCC					
09/01/2020	\$15.00 Pos Exemption	POS Exemption Transfer	\$44.86	\$0.00	\$0.00
NCCC					
09/02/2020	\$50.00 OffConnect Kiosk Deposit	8371345195545404703/Ma thews , Brandon	\$94.86	\$0.00	\$0.00
NCCC					
09/02/2020	\$27.80 OffConnect Kiosk Deposit	8376474185830507878/La ckey, Calyssa	\$122.66	\$0.00	\$0.00
NCCC					
09/03/2020	(\$96.29) Commissary Sale	Ticket Number 467968	\$26.37	\$0.00	\$0.00
NCCC					
09/04/2020	\$18.00 State Pay	State Pay	\$44.37	\$0.00	\$0.00
NCCC					
09/08/2020	\$20.00 OffConnect Kiosk Deposit	8384387878744499487/La ckey, Calyssa	\$64.37	\$0.00	\$0.00
NCCC					
09/10/2020	\$50.00 OffConnect Kiosk Deposit	8389655973255980389/Art is, Ashia	\$114.37	\$0.00	\$0.00
NCCC					
09/11/2020	(\$97.96) Commissary Sale	Ticket Number 468149	\$16.41	\$0.00	\$0.00
NCCC					
09/22/2020	\$99.00 OffConnect Kiosk Deposit	8407670463922709793/Ma thews , Brandon	\$115.41	\$0.00	\$0.00
NCCC					
09/25/2020	(\$108.49) Commissary Sale	Ticket Number 470373	\$6.92	\$0.00	\$0.00
NCCC					
09/30/2020	\$50.00 OffConnect Kiosk Deposit	8418821527862519071/La ckey, Calyssa	\$56.92	\$0.00	\$0.00
NCCC					
10/01/2020	(\$15.00) Inmate's Personal Account	POS Exemption Transfer	\$41.92	\$0.00	\$0.00
NCCC					
10/01/2020	\$15.00 Pos Exemption	POS Exemption Transfer	\$56.92	\$0.00	\$0.00
NCCC					
10/02/2020	\$50.00 OffConnect Kiosk Deposit	8418845852476908833/Art is, Ashia	\$106.92	\$0.00	\$0.00
NCCC					
10/02/2020	(\$97.61) Commissary Sale	Ticket Number 471454	\$9.31	\$0.00	\$0.00
NCCC					

10/06/2020	(\$2.10) Postage Charges (USPS)	tyleigh artis	\$7.21	\$0.00	\$0.00
NCCC					
10/09/2020	(\$5.30) Commissary Sale	Ticket Number 472412	\$1.91	\$0.00	\$0.00
NCCC					
10/09/2020	\$18.00 State Pay	State Pay	\$19.91	\$0.00	\$0.00
NCCC					
10/10/2020	\$20.00 OffConnect Kiosk Deposit	8430887161735685478/Ma thews , Brandon	\$39.91	\$0.00	\$0.00
NCCC					
10/16/2020	\$100.00 OffConnect Kiosk Deposit	8443425787740693862/Art is, Ashia	\$139.91	\$0.00	\$0.00
NCCC					
10/16/2020	(\$85.72) Commissary Sale	Ticket Number 473484	\$54.19	\$0.00	\$0.00
NCCC					
10/18/2020	(\$5.35) Inmate's Personal Account	Transfer Funds for JPay Media Credits	\$48.84	\$0.00	\$0.00
NCCC					
10/18/2020	\$5.35 Pos Exemption	Transfer Funds for JPay Media Credits	\$54.19	\$0.00	\$0.00
NCCC					
10/18/2020	(\$5.35) JPay Media Credits	Automated JPay Media Credits	\$48.84	\$0.00	\$0.00
NCCC					
10/21/2020	(\$2.10) Postage Charges (USPS)	kaylee johnson	\$46.74	\$0.00	\$0.00
NCCC					
10/29/2020	\$40.00 OffConnect Kiosk Deposit	8459589435903190305/Jo hnson, Kaylee	\$86.74	\$0.00	\$0.00
NCCC					
10/30/2020	(\$77.60) Commissary Sale	Ticket Number 475111	\$9.14	\$0.00	\$0.00
NCCC					
11/01/2020	\$0.00 \$15.00 Reservation to Pos Exemption	Odrc Pos Exemption	\$9.14	\$0.00	\$0.00
NCCC					
11/05/2020	\$79.00 OffConnect Kiosk Deposit	8463682562704287077/Ma thews , Brandon	\$88.14	\$0.00	\$0.00
NCCC					
11/05/2020	(\$76.02) Commissary Sale	Ticket Number 476294	\$12.12	\$0.00	\$0.00
NCCC					
11/06/2020	(\$9.50) Inmate's Personal Account	Transfer Funds for JPay Media Credits	\$2.62	\$0.00	\$0.00
NCCC					
11/06/2020	\$9.50 Pos Exemption	Transfer Funds for JPay Media Credits	\$12.12	\$0.00	\$0.00
NCCC					

11/06/2020	(\$9.50) JPAY Media Credits	Automated JPAY Media Credits	\$2.62	\$0.00	\$0.00
NCCC					
11/06/2020	\$18.00 State Pay	State Pay	\$20.62	\$0.00	\$0.00
NCCC					
11/13/2020	\$50.00 OffConnect Kiosk Deposit	8475333948642698597/La ckey, Calyssa	\$70.62	\$0.00	\$0.00
NCCC					
11/13/2020	(\$68.31) Commissary Sale	Ticket Number 477772	\$2.31	\$0.00	\$0.00
NCCC					
11/23/2020	\$50.00 OffConnect Kiosk Deposit	8489915316743710054/Art is, Ashia	\$52.31	\$0.00	\$0.00
NCCC					
11/27/2020	(\$46.67) Commissary Sale	Ticket Number 479912	\$5.64	\$0.00	\$0.00
NCCC					
12/01/2020	\$0.00 \$15.00 Reservation to Pos Exemption	Odrc Pos Exemption	\$5.64	\$0.00	\$0.00
NCCC					
12/01/2020	\$20.00 OffConnect Kiosk Deposit	8502857634945705318/Jo hnson, Kaylee	\$25.64	\$0.00	\$0.00
NCCC					
12/03/2020	(\$22.67) Commissary Sale	Ticket Number 481132	\$2.97	\$0.00	\$0.00
NCCC					
12/04/2020	\$18.00 State Pay	State Pay	\$20.97	\$0.00	\$0.00
NCCC					
12/05/2020	(\$15.00) Fundraisers - No Specific Club	Toastmaster - Pizza Hut 2020	\$5.97	\$0.00	\$0.00
NCCC					
12/11/2020	\$50.00 OffConnect Kiosk Deposit	8513298699334984993/Art is, Ashia	\$55.97	\$0.00	\$0.00
NCCC					
12/11/2020	\$80.00 OffConnect Kiosk Deposit	8513294678809388321/Jo hnson, Kaylee	\$135.97	\$0.00	\$0.00
NCCC					
12/11/2020	(\$121.18) Commissary Sale	Ticket Number 482414	\$14.79	\$0.00	\$0.00
NCCC					
12/14/2020	\$50.00 OffConnect Kiosk Deposit	8526117848679458150/La ckey, Calyssa	\$64.79	\$0.00	\$0.00
NCCC					
12/19/2020	\$45.00 OffConnect Kiosk Deposit	8526149124144768358/Jo hnson, Kaylee	\$109.79	\$0.00	\$0.00
NCCC					
12/24/2020	(\$91.59) Commissary Sale	Ticket Number 484533	\$18.20	\$0.00	\$0.00
NCCC					

12/25/2020	(\$18.00) Inmate's Personal Account	Transfer Funds for JPay Media Credits	\$0.20	\$0.00	\$0.00
NCCC					
12/25/2020	\$18.00 Pos Exemption	Transfer Funds for JPay Media Credits	\$18.20	\$0.00	\$0.00
NCCC					
12/25/2020	(\$18.00) JPay Media Credits	Automated JPay Media Credits	\$0.20	\$0.00	\$0.00
NCCC					
12/27/2020	\$50.00 OffConnect Kiosk Deposit	8540763821275882853/Johson, Kaylee	\$50.20	\$0.00	\$0.00
NCCC					
12/31/2020	(\$42.89) Commissary Sale	Ticket Number 485786	\$7.31	\$0.00	\$0.00
NCCC					

Outstanding Debts:

Start Date	Description	Case	Agency	County	Total Debt	Paid to Date	Balance Owed

**Total Outstanding Case Balances** \$0.00

Outstanding Holds:

Start Date	Description	Case	Agency	County	Total Debt	Paid to Date	Balance Owed

**Total Outstanding Case Holds** \$0.00

Outstanding Investments / EPC:

Investment Type	Investment Type Description	Invest Company	Company Description	Balance