

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

Jim Washington — PETITIONER
(Your Name)

VS.

Trident Medical Center, LLC — RESPONDENT(S)

PROOF OF SERVICE

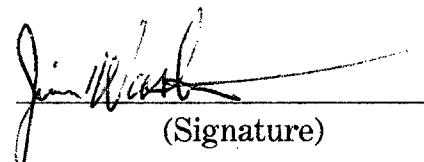
I, Jim Washington, do swear or declare that on this date, August 1, 20 21, as required by Supreme Court Rule 29 I have served the enclosed MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS and PETITION FOR A WRIT OF CERTIORARI on each party to the above proceeding or that party's counsel, and on every other person required to be served, by depositing an envelope containing the above documents in the United States mail properly addressed to each of them and with first-class postage prepaid, or by delivery to a third-party commercial carrier for delivery within 3 calendar days.

The names and addresses of those served are as follows:

C. Mitchell Brown, P.O. Box 11070, Columbia, S.C. 29211 (803) 799-2000
David H. Batten, 4141 Parklake Ave., Suite 350, Raleigh, NC. (919) 434-2221
Blake T. Williams, P.O. Box 11070, Columbia, S.C. 29211 (803) 749-2000

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

Executed on August 1, 20 21


(Signature)