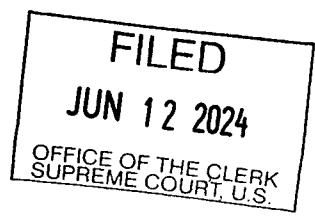


No. 23 - 7757



IN THE  
**Supreme Court of the United States**

REVEREND DR. SAMUEL T WHATLEY,  
SAMUEL T. WHATLEY, II,  
PACITA D. WHATLEY,

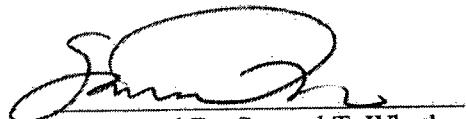
PETITIONERS,

v.

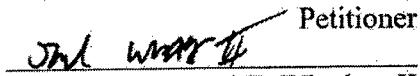
OAKBROOK HEALTH AND REHABILITATION CENTER,  
RESPONDENT.

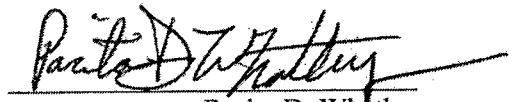
**MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS**

The petitioners ask for leave to file the attached petition for writ of certiorari without prepayment of costs and to proceed in *forma pauperis*, and have previously been granted leave in the following courts: *Whatley et al. v. Oakbrook Health and Rehabilitation Center, Charleston, SC*, No. 24-1006 (4th Cir. Mar. 2024), and *Whatley et al. v. Oakbrook Health and Rehabilitation Center, Charleston, SC*, Civil Action 2:22-cv-02274 (D.S.C. Dec. 13, 2023). Petitioners' affidavit or declaration in support of this motion is attached.



Reverend Dr. Samuel T. Whatley  
HD Div, ABD Ph.D. CS, DM, and Ph.D. Law and Policy Student  
Petitioner

  
Samuel T. Whatley, II  
ABD Ph.D. Criminal Justice-Lead.  
(Doctoral Candidate at Liberty University)  
Petitioner



Pacita D. Whatley  
Retired Federal Investigator  
Petitioner

*Friends of the Court and Biblically Founding  
Scholar and Historically Related to Family of the American Revolution*

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

I, REV. DR. SAMUEL WHATLEY, 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	estimated \$ <u>650</u> -	\$ <u>N/A</u>	\$ <u>650</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>0</u>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>
Total monthly income:	\$ <u>650</u> <i>estimate</i>	\$ <u>N/A</u>	\$ <u>0</u>	\$ <u>N/A</u>

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
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

4. How much cash do you and your spouse have? \$ 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
Checking	\$ 150	\$ N/A
Savings	\$ 100	\$ N/A

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

Home  
Value estimated #250,000?  Other real estate  
Value \_\_\_\_\_

Lots of Repairs  
Estimated

Motor Vehicle #1  
Year, make & model 2011 Honda,  
Value \$ 7000 estimated CIVIC  
Lots of Repairs Needed

Motor Vehicle #2  
Year, make & model 1994 Cadillac Fleetwood  
Value \$ 1000 estimated lots of  
Repairs needed.

Other assets  
Description unconditionally ordered by Richland Family  
Value \$ 62,000 Court 30 January 2023, failed to  
return sell marital home, pay in illegal sanctions  
Cost \$ 1500, outrageous attorney fees  
\$ 5000 - Backtracking property agent fees  
over \$ 2000, and almost \$ 44,000 to  
other closing attorneys that were  
friends of the family court judge,  
ex spouse, had to repay disabled  
mother's debt, hospital cost, travel  
Court cost and many Repairs  
still on going -

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>	\$ 0	\$ 0
	\$ _____	\$ _____
	\$ _____	\$ _____

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>	<u>N/A</u>	<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)	\$ 0	\$ N/A
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)	estimated \$ 460 -	\$ N/A
Home maintenance (repairs and upkeep)	<u>depends</u> \$ 50 -	\$ N/A
Food	<u>ongoing</u> \$ 350 -	\$ N/A
Clothing	\$ 50 -	\$ N/A
Laundry and dry-cleaning	\$ 50 -	\$ N/A
Medical and dental expenses	\$ 50 -	\$ N/A

	You	Your spouse
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	\$ 145	\$ N/A
Life	\$ 0	\$ N/A
Health	\$ 0	\$ N/A
Motor Vehicle	\$ 73	\$ N/A
Other:	\$ 0	\$ N/A
Taxes (not deducted from wages or included in mortgage payments)		
(specify): <u>May have depends</u> \$ 0		\$ N/A
Installment payments <u>large amount unknown at this time</u>		
Motor Vehicle	\$ 0	\$ N/A
Credit card(s)	\$ 200-	\$ N/A
Department store(s)	\$ 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): <u>depends</u> \$ 0		\$ N/A
Total monthly expenses: <u>estimated</u> \$ 1218- <u>changes monthly</u>		\$ N/A

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 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.

*Student, unemployed, as self-employed as caregiver to seriously ill, death-disability of mother. Did apply as a major candidate, but unknown of outcome.*  
I declare under penalty of perjury that the foregoing is true and correct.

Executed on: 1 November, 2023

*and*

10 January 2024

*Sam D.*  
(Signature)

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

I, SAMUEL WHATLEY, Jr., 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>400.00</u>	\$ <u>NIA</u>	\$ <u>400.00</u>	\$ <u>NIA</u>
Self-employment	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Income from real property (such as rental income)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Interest and dividends	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Gifts	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Alimony	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Child Support	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Retirement (such as social security, pensions, annuities, insurance)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Disability (such as social security, insurance payments)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Unemployment payments	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Public-assistance (such as welfare)	\$ <u>0</u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
Other (specify): _____	\$ <u> </u>	\$ <u> </u>	\$ <u>0</u>	\$ <u> </u>
<b>Total monthly income:</b>	<b>\$ <u>400.00</u></b>	<b>\$ <u> </u></b>	<b>\$ <u>400.00</u></b>	<b>\$ <u> </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>SCI SUMMIT LLC</u>	<u>6800 GULFPORT BLVD S SUITE 203-239</u>	<u>03/2024 - PRESENT</u>	<u>\$ 400.00 &gt; 0</u>
	<u>SOUTH PASADENA FL</u>		<u>\$</u>
	<u>33707</u>		<u>\$</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>	<u>N/A</u>	<u>N/A</u>	<u>\$ N/A</u>
<u>1</u>	<u>1</u>	<u>1</u>	<u>\$</u>

4. How much cash do you and your spouse have? \$ \_\_\_\_\_  
 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>CHECKING</u>	<u>\$ 1500.00</u>	<u>\$ N/A</u>
<u>SAVINGS</u> - <u>Student loan</u> - <u>mostly Student</u> <u>loan to debt refund</u> -	<u>\$ 5500.00</u>	<u>\$ 1</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 \_\_\_\_\_

Other real estate  
 Value \_\_\_\_\_

Motor Vehicle #1  
 Year, make & model 2011, HONDA, CRV  
 Value \$ 3000 - many Repairs

Motor Vehicle #2  
 Year, make & model 1986, FORD, MUSTANG  
 Value \$ 270 many Repairs  
35k miles  
NOT Running yet

Other assets  
 Description \_\_\_\_\_  
 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>	\$ <u>N/A</u>	\$ <u>N/A</u>
	\$ <u> </u>	\$ <u> </u>
	\$ <u> </u>	\$ <u> </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>	<u>N/A</u>	<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>N/A</u>	\$ <u>N/A</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> </u>	\$ <u> </u>
Home maintenance (repairs and upkeep)	\$ <u> </u>	\$ <u> </u>
Food	\$ <u> </u>	\$ <u> </u>
Clothing	\$ <u> </u>	\$ <u> </u>
Laundry and dry-cleaning	\$ <u> </u>	\$ <u> </u>
Medical and dental expenses	\$ <u> </u>	\$ <u> </u>

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

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 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.

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

Executed on: JUNE, 2024

Janet WATKINS

(Signature)

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

I, PACITA D. WHATLEY, 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	\$ 0	\$ N/A	\$ 0	\$ N/A
Self-employment <i>teaching depends and not column 4 is 1/3</i>	\$ 1000	\$ N/A	\$ 1000 ?? as needed	\$ 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)	\$ 3266	\$ N/A	\$ 3266 estimator	\$ N/A
Disability (such as social security, insurance payments)	\$ 0	\$ N/A	\$ 0	\$ N/A
Unemployment payments	\$ 0	\$ N/A	\$ 0/A	\$ N/A
Public-assistance (such as welfare)	\$ 0	\$ N/A	\$ 0	\$ N/A
Other (specify): <i>lots of expenses (6200-) may be estimated and not always disabled AS is need teaching on line - bank accounts</i>	\$ 0	\$ N/A	\$ 0	\$ N/A
Total monthly income:	\$ 4766	N/A	\$ 0	\$ N/A

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
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
			\$
			\$

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

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
Checking	\$ 120	\$ N/A
Savings	\$ 100	\$
- Much lost and of pennies	\$	\$
+ two dependents -		

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

Home \$ 224,000 estimate  Other real estate  
Value \_\_\_\_\_ Value \_\_\_\_\_

*lots of repairs, termite damage  
leaking Roof, handicapped Ramp*

Motor Vehicle #1 Year, make & model \_\_\_\_\_  Motor Vehicle #2 Year, make & model \_\_\_\_\_

Value \_\_\_\_\_ Value \_\_\_\_\_

*lots of contested debt that seems to be fraud by  
creators that violate state law (Wellsfargo, et al)*

Other assets Description \_\_\_\_\_ Value \_\_\_\_\_  
*lots of expenses*

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>	\$ <u>0</u>	\$ <u>0</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>	<u>N/A</u>	<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>1200 -</u>	\$ <u>N/A</u>
Are real estate taxes included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is property insurance included? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	<u>estimate</u> \$ <u>9352</u>	\$ <u>N/A</u>
Home maintenance (repairs and upkeep)	\$ <u>225 -</u>	\$ <u>N/A</u>
Food	\$ <u>9702</u>	\$ <u>N/A</u>
Clothing	<u>100</u> \$ <u>50 = 12</u>	\$ <u>N/A</u>
Laundry and dry-cleaning	\$ <u>120 -</u>	\$ <u>N/A</u>
Medical and dental expenses	<u>estimate</u> \$ <u>971 -</u>	\$ <u>N/A</u>

	You	Your spouse
Transportation (not including motor vehicle payments)	\$ 150 -	\$ 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	\$ 60.20	\$ N/A
Health	\$ 176 -	\$ N/A
Motor Vehicle	\$ 302	\$ N/A
Other: <i>additional expense estimated</i>	\$ 142.42	\$ 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(s)	\$ 250 -	\$ N/A
Department store(s)	\$ 0	\$ N/A
Other: <i>medical debt care, supplies, hospital treatment,</i>	\$ 345 -	\$ 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): <i>begin material cost, vitamins, medications, diapers, et al.</i>	\$ 82 -	\$ N/A
<b>Total monthly expenses:</b>	<i>\$ 683.60</i>	\$ N/A
	<i>estimated (-\$636) ; debt over</i>	

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.

??

*There will be lots of repairs on house and medical cost  
As stated in item "12"*

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.

*As stated in item "9", house needs lots of repairs,  
furniture damage, medical, handicap accommodation, ramp,  
hard Raits, new roof, medical supplies, elderly disabled.*

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

Executed on: 29 June, 20 29

*Paula D. Whalley*  
(Signature)