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CERTIFICATION

RE:	Shamond Howard #456039 17-871-JPG	
	I,(Name and Title of Authorized Office	, hereby certify that er - please print)
	nond Howard currently has the sum of \$_ aty Jail	on account at St. Clair
		Signature of Authorized Officer
Dated	1:	

PURSUANT TO 28 U.S.C. § 1915(a)(2), PLEASE ATTACH A COPY OF THE INMATE'S TRUST FUND ACCOUNT STATEMENT FOR THE PAST SIX MONTHS.

Please mail the statement and this completed form to:

Clerk of Court United States District Court Southern District of Illinois P.O. Box 249 East St. Louis, IL 62201

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