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March 16, 2023

VIA EMAIL ONLY

Webex
1220 Senate Street, Suite 200
Columbia, SC 29201
transcripts@sccourts.org

RECEIVED
Mar 16 2023
SC Court of Appeals

Re: The Estate of Jo Eva Rice v. Fundamental Clinical and Operational Services, LLC
Appeal Case No.: 2023-000432
Underlying Case No.: 2021-CP-42-03701
Claim No.: HBLM# 1923547
YCR File: 14347-20210593

Dear Court Reporter:

This law firm represents Fundamental Clinical and Operational Services, LLC; Fundamental Administrative Services, LLC; and THI of South Carolina at Magnolia Place-Spartanburg, a/k/a Physical Rehab and Wellness of Spartanburg in the above-referenced matter. In that regard, pursuant to the attached transcript request form, I would like to request two hearing transcripts in the above-referenced matter. The first hearing was held on April 1, 2023 in front of the Honorable J. Durham Cole. The second hearing was held on February 21, 2023 also in front of the Honorable J. Durham Cole.

Please inform me if you require a deposit prior to mailing us a copy and we will send it immediately, otherwise we will remit payment upon receipt of your invoice. If you have any questions, please contact me at the telephone number listed above.

With best wishes and kindest regards, I am

Sincerely,

CLEMENT RIVERS, LLP

Aimee M. Justman
Legal Assistant

/amj

cc: W. Harold Christian, Jr., Esquire, Christian & Christian, LLC
Matthew W. Christian, Christian & Davis LLC
Jenny Abbott Kitchings, Clerk of Court, South Carolina Court of Appeals
South Carolina Court Administration

Transcript Request Form

Pursuant to Rule 207 and 607 of the South Carolina Appellate Court Rules, the transcribed paper copy is the official record of court proceedings. You may request a transcript by completing this form and emailing it to the Court Reporter and to South Carolina Court Administration at transcripts@sccourts.org. Click [here](#) for instructions on how to find the court reporter's email and mailing addresses. Once the court reporter receives your request, it will be processed pursuant to Rule 207 and 607 of the SCACR. Rule 607(h) governs the fees for transcripts, which are not provided for free or at reduced rates to any party. Please send by mail a money order or certified bank check to the court reporter in order to obtain the transcript. Some court reporters may accept personal checks. Please check with the court reporter to see if this option is available. Once your request is received, you will receive a copy of this form with the bottom portion completed. Please promptly submit your payment in order for the transcript to be provided. If you need to cancel the transcript request for any reason, you are responsible for paying for the pages of the transcript that have already been completed at the time of the cancellation.

Requestor's Information			
Full Name <u>Russell G. Hines</u>		Phone Number <u>(843) 720-5488</u>	Email Address <u>ajustman@ycrlaw.com</u>
Mailing Address <u>25 Calhoun Street, Suite 400</u>		City <u>Charleston</u>	State <u>SC</u>
Transcript Information			
Docket Number <u>2021-CP-42-03701</u>		Case Caption (i.e. State v. John Doe or Smith v. Smith) <u>The Estate of Jo Eva Rice v. Fundamental Clinical and Operational Services, LLC</u>	
Date(s) of Proceeding <u>April 1, 2022</u> <u>February 21, 2023</u>		Circuit <input checked="" type="checkbox"/> Family <input type="checkbox"/>	County <u>Spartanburg</u>
Presiding Judge <u>J. Durham Cole</u>		Expedited Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Court Reporter(s) <u>Webex</u>		Opposing Counsel <u>W. Harold Christian, Jr.</u> <u>Matthew W. Christian</u>	

Requestor's Signature: s/Russell G. Hines
(Typed name will serve as signature)

Date: March 16, 2023

Note: If you are ordering a transcript pursuant to Rule 207(a)(1), SCACR, you must contemporaneously furnish all parties, the Office of Court Administration, and the clerk of the appellate court with copies of all correspondence with the court reporter.

For Court Reporter Use Only			
Full Name _____		Date Received _____	Email Address _____
Notice of Estimate to Requestor Party Date: _____ Number of Pages: _____ Estimated Amount _____			
Mailing Address for Payment _____		City _____	State _____
		Zip Code _____	