

ORIGINAL



Division of Appellate Defense
1330 Lady Street, Suite 401
Columbia, South Carolina 29201-3332
Post Office Box 11589
Columbia, South Carolina 29211-1589
Telephone: (803) 734-1330
Facsimile: (803) 734-1397

Robert M. Dudek, Chief Appellate Defender
Wanda H. Carter, Deputy Chief Appellate Defender

December 28, 2012

RECEIVED

DEC 28 2012

S.C. Supreme Court

Honorable Daniel E. Shearouse
Clerk, South Carolina Supreme Court
Post Office Box 11330
Columbia, South Carolina 29211

Re: William Gladney Harden v. State

Dear Mr. Shearouse:

The above titled case file was opened in our office on November 18, 2011. The petition for writ of certiorari on appeal was filed with this Court on March 23, 2012. However, on August 7, 2012, the South Carolina Office of Probation, Pardon, and Parole advised that Mr. Harden was deceased. Attached is a copy of the death certificate for William Gladney Harden verifying Mr. Harden's deceased status. Therefore, based on this information and document, counsel requests that this appeal be dismissed.

If you have any questions concerning this matter, please do not hesitate to contact me.

Sincerely,

Wanda H. Carter
Deputy Chief Appellate Defender

WHC/eab

Enclosure:
Death Certification
cc: Karen Ratigan, Esquire

STATE OF SOUTH CAROLINA
CERTIFICATION OF VITAL RECORD

DEATH CERTIFICATION

STATE FILE NUMBER : 139-12-022129

DECEDENT'S NAME: *WILLIAM HARDEN*

SEX: MALE

AKA's: NA

SOCIAL SECURITY NUMBER:

ARMED FORCES: NO

DATE OF BIRTH: JULY 05, 1941

AGE: 71 YEARS

TYPE OF PLACE OF DEATH: HOSPICE FACILITY

COUNTY OF DEATH: GREENVILLE

NAME AND ADDRESS OF PLACE OF DEATH: MCCALL HOSPICE HOUSE OF GREENVILLE, SIMPSONVILLE, SC 29680

PLACE OF DISPOSITION: THOMAS MCAFFEE CREMATION CENTER

DISPOSITION LOCATION: GREENVILLE, SOUTH CAROLINA

METHOD OF DISPOSITION: DONATION

DECEDENT'S RESIDENCE: 1836 WEST GEORGIA ROAD, SIMPSONVILLE, GREENVILLE COUNTY, SC, 29680

PLACE OF BIRTH: SOUTH CAROLINA

MARITAL STATUS: NEVER MARRIED

SURVIVING SPOUSE'S NAME: NA

FATHER'S NAME: SAMUEL HARDEN

MOTHER'S NAME PRIOR TO FIRST MARRIAGE: WILHE-MAE MEIKS

INFORMANT'S NAME: BEN PHILLIPS JR

RELATIONSHIP: POA--

MAILING ADDRESS: 808 CONCORD AVENUE, ANDERSON, SC, 29621

FUNERAL HOME: THOMAS MCAFFEE FUNERAL HOME, 639 N. MAIN ST/PO BOX 527, GREENVILLE, SC, 29601

FUNERAL DIRECTOR: STEVEN K. HAWLEY

LICENSE NUMBER: 1534

EMBALMER'S NAME: KURT A WOLFE

LICENSE NUMBER: 3638

ACTUAL OR PRESUMED DATE OF DEATH: JULY 10, 2012

MANNER OF DEATH: NATURAL

ACTUAL OR PRESUMED TIME OF DEATH: -0250

CAUSE OF DEATH - PART I

STAGE 4 METASTATIC COLORECTAL ADENOCARCINOMA

OTHER SIGNIFICANT CONDITIONS - PART II:

NA

CORONER CONTACTED? YES

AUTOPSY PERFORMED? NO

AUTOPSY AVAILABLE? NA

DATE OF INJURY: NA

TIME OF INJURY: NA

INJURY AT WORK? NA

PLACE OF INJURY: NA

LOCATION OF INJURY: NA

HOW THE INJURY OCCURRED?

NA

CERTIFIER NAME AND TITLE: DR. PATRICK C CAREY,

LICENSE NUMBER: 28742

CERTIFIER'S ADDRESS: 1836 W GEORGIA ROAD, SIMPSONVILLE, SC, 29680

DATE FILED: JULY 24, 2012

DATE OF ISSUANCE: JULY 24, 2012

SPECIAL INSTRUCTIONS:

NA

SC02351629

This is a true certification of the facts on file in the Division of Vital Records, SC Department of Health and Environmental Control.

Catherine Templeton

Catherine Templeton
Director and State Registrar

Guang Zhao

Guang Zhao
Assistant State Registrar

This copy is not valid unless prepared on an engraved border displaying the state seal and issuing agency logo.

Revision Date: 03/21/2012

