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Sep 12 2025

SC Court of Appeals

From: [Gilbert Salters](#)
To: [Court Of Appeals Filings](#); [Court Of Appeals Filings](#)
Subject: Re: Motion Packet
Date: Friday, September 12, 2025 3:11:42 PM

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04/02/2025 10:05 AM

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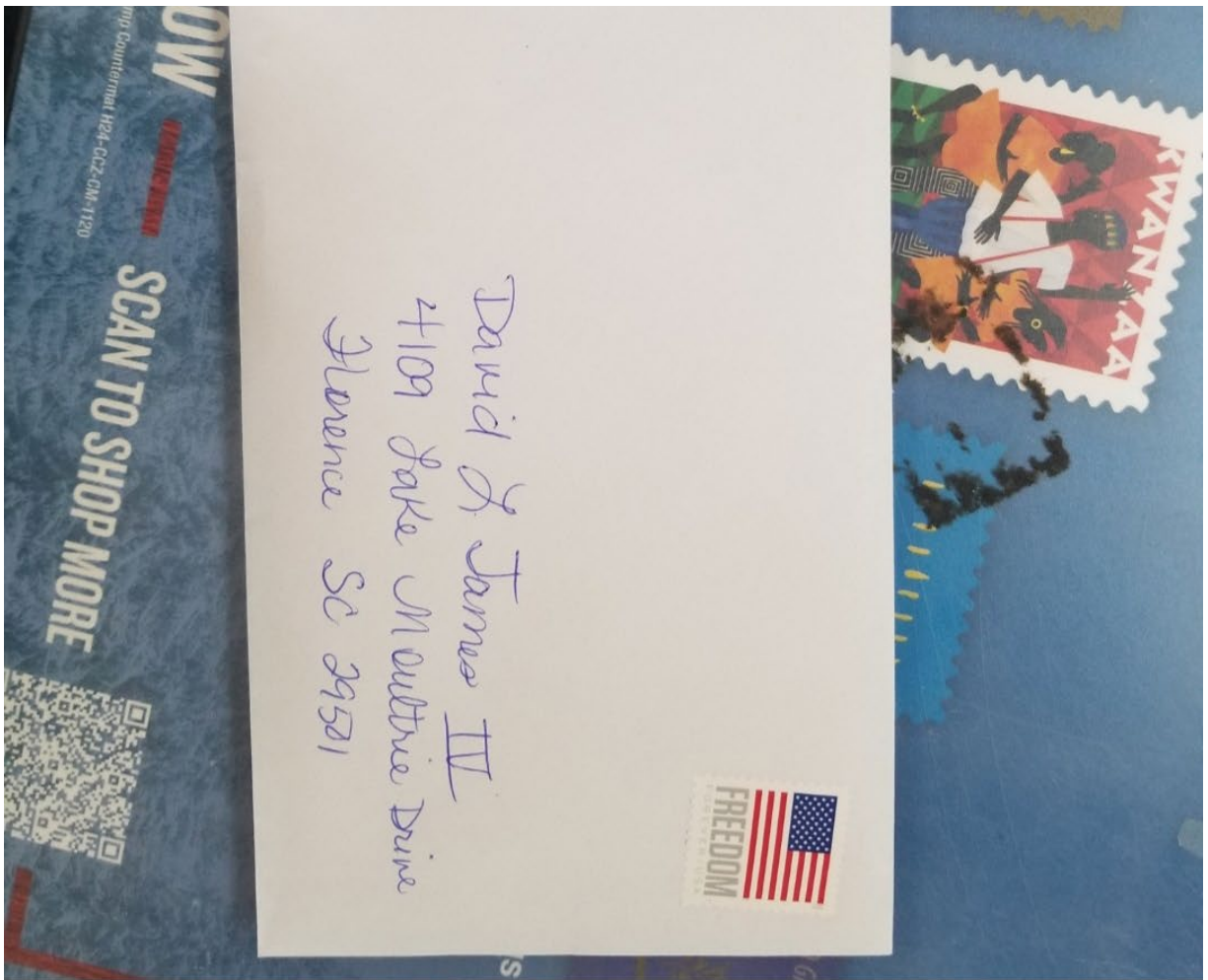


or call 1-800-410-7420.

White
Gilbert Saltero
3413 Brocayne Drive
Apt. #K
Charlotte N.C. 28205



DESKWINDO



Details



April 2, 2025 10:04 AM

RECEIVED
 Mar 28 2025
 SC Court of Appeals



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/Transcriptionist and to South Carolina Court Administration at transcripts@sccourts.org. If WebEx or DCRP were used to capture the record, please indicate below and send the form to transcripts@sccourts.org.

Requestor's Information		
Full Name <i>Gilbert Salters</i>	Law Firm/Agency <i>N/A</i>	Phone Number <i>843 616-8347</i>
Email Address <i>gilbertsalters@yahoo.com</i>	Mailing Address <i>3413 Biscayne Dr Apt K Charlotte, NC 28205</i>	
Is the requestor a party in the case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If no, does the requestor represent a party? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of party _____		
Transcript Information		
Docket Number <i>2024 CP2162119</i>	Full Case Caption (i.e. State v. John Doe or John Smith v. Jane Smith) <i>Gilbert Salters Vs David L James IV</i>	Circuit <input checked="" type="checkbox"/> Family <input type="checkbox"/>

Date(s) of Proceeding 1-30-2025	County Florence	Appeal pending <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Death Penalty <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Presiding Judge Judge Michael Nettles	Special Circumstances Is the hearing to be transcribed one of the following: <input type="checkbox"/> Termination of parental rights <input type="checkbox"/> Adoption <input type="checkbox"/> Any actions involving child custody/visitation.		
Opposing Counsel(s) (name and email address)	Delivery Timeframe (check Rule 607 for current page rates) <input type="checkbox"/> Quote <input type="checkbox"/> Rough Draft <input type="checkbox"/> Overnight delivery <input type="checkbox"/> Daily delivery <input type="checkbox"/> Expedited delivery (7 days) Due on/before: <input checked="" type="checkbox"/> Regular delivery (60 days)		
Court Reporter(s)	<input type="checkbox"/> WebEx <input type="checkbox"/> DCRP	Delivery Method (additional fees may apply) <input checked="" type="checkbox"/> PDF / Email <input type="checkbox"/> Hard Copy/Priority Mail (\$50 + shipping) <input type="checkbox"/> PDF & Hard Copy/Priority Mail (\$50 + shipping)	
Portion of proceeding to be transcribed <input checked="" type="checkbox"/> Entire hearing <input type="checkbox"/> Voir dire by juror <input type="checkbox"/> Jury selection <input type="checkbox"/> Plaintiff's opening statement <input type="checkbox"/> Defendant's opening statement <input type="checkbox"/> Plaintiff's closing arguments <input type="checkbox"/> Defendant's closing arguments <input type="checkbox"/> Entire direct examination <input type="checkbox"/> Entire cross examination <input type="checkbox"/> Entire redirect <input type="checkbox"/> Examination of witness (W) by attorney (A) W: _____ A: _____		Responsible Payor <input type="checkbox"/> Private / Self <input type="checkbox"/> Court Appointed Counsel Appeals Attorney _____ Email _____ <input type="checkbox"/> Other _____	
<input checked="" type="checkbox"/> Ruling of the court		Next Hearing Date	

Requestor's Signature: Will Leven: Dabtz Agent Date: 3-14-2025
(Typed name will serve as signature)

NOTE: Requests 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, regardless of indigent status. Please promptly submit your payment in the method of payment requested, in order for the transcript to be produced. In some cases, a deposit may be required before the transcript can be placed in the production queue. You may also request a quote before deciding to order. *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.*

Greetings ,
This is Gilbert Salters. I'm requesting the transcript of a recent case.

Case number 2024CP2102119
Date 01/30/2025
Judge - Michael Nettles

From: Gilbert Salters
3413 Biscayne Dr Unit K
Charlotte, Nc 28205
Cellphone 843-616-8347

Thanks be Blessed



RE: ^_Transcript^_ Request



Me

gilbertsalters@yahoo.com

Show less



To

transcripts@sccourts.org

cc

stepfilings@sccourts.com

Date Mar 14, 1:40 PM



TRANSCRIPT REQUEST FORM

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Email Address <i>gilbertsalters@yahoo.com</i>	Mailing Address <i>3413 Biscayne Dr Apt K Charlotte, NC 28205</i>		
Is the requestor a party in the case? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
If no, does the requestor represent a party? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of party _____			
Transcript Information			
Docket Number <i>2024 CP2102119</i>	Full Case Caption (i.e. State v. John Doe or John Smith v. Jane Smith) <i>Gilbert Salters Vs David L James IV</i>		Circuit <input checked="" type="checkbox"/> Family <input type="checkbox"/>
Date(s) of Proceeding <i>1-30-2025</i>	County <i>Florence</i>	Appeal pending <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Death Penalty <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Presiding Judge <i>Judge Michael Nettles</i>	Special Circumstances Is the hearing to be transcribed one of the following: <input type="checkbox"/> Termination of parental rights <input type="checkbox"/> Adoption <input type="checkbox"/> Any actions involving child custody/visitation.		
Opposing Counsel(s) (name and email address) _____	Delivery Timeframe (check Rule 607 for current page rates) <input type="checkbox"/> Quote <input type="checkbox"/> Rough Draft <input type="checkbox"/> Overnight delivery <input type="checkbox"/> Daily delivery <input type="checkbox"/> Expedited delivery (7 days) Due on/before: _____ <input checked="" type="checkbox"/> Regular delivery (60 days)		
Court Reporter(s) _____	<input type="checkbox"/> WebEx <input type="checkbox"/> DCRP	Delivery Method (additional fees may apply) <input checked="" type="checkbox"/> PDF / Email <input type="checkbox"/> Hard Copy/Priority Mail (\$50 + shipping) <input type="checkbox"/> PDF & Hard Copy/Priority Mail (\$50 + shipping)	
Portion of proceeding to be transcribed <input checked="" type="checkbox"/> Entire hearing <input type="checkbox"/> Voir dire by juror <input type="checkbox"/> Jury selection <input type="checkbox"/> Plaintiff's opening statement <input type="checkbox"/> Defendant's opening statement <input type="checkbox"/> Plaintiff's closing arguments <input type="checkbox"/> Defendant's closing arguments <input type="checkbox"/> Entire direct examination <input type="checkbox"/> Entire cross examination <input type="checkbox"/> Entire redirect <input type="checkbox"/> Examination of witness (W) by attorney (A) W: _____ A: _____ <input checked="" type="checkbox"/> Ruling of the court		Responsible Payor <input type="checkbox"/> Private / Self <input type="checkbox"/> Court Appointed Counsel Appeals Attorney _____ Email _____ <input type="checkbox"/> Other _____	
Next Hearing Date _____			

Requestor's Signature: *Will-Jen's Datto Agent* Date: *3-14-2025*
 (Typed name will serve as signature)

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Gilbert - Levern : Salters
3413 Biscayne Dr Unit K
Charlotte , Nc 28205

RE : Gilbert - Levern : Salters Vs. David L James.
IV
Case number 2025 - 000459

To whomever this may concern.
On 4/02/2025 Gilbert - Levern:Salters served
David L James with a copy of the transcript
request form. I also resent a usps mailed copy to

Office of Court Administration
Court Administration located at Calhoun Building
1220 Senate Street, Suite 200
Columbia, SC 29201 on 4/4/2025

A few supporting documents

[Sent from Yahoo Mail on Android](#)

On Fri, Sep 12, 2025 at 11:25 AM, Court Of Appeals Filings
<ctappfilings@sccourts.org> wrote:

Good Morning,

Please review the South Carolina Appellate Court Rules (SCACR) listed below as well as the attached documents. The fact that you are not an attorney does not relieve you of the responsibility to perfect your appeal in accordance with the SCACR.

The South Carolina Appellate Court Rules may be found on our website <https://sccourts.org/resources/judicial-community/court-rules/>.

For Rehearing and Remittitur: **Rule 221**, SCACR
For Motions and Petitions Generally: **Rule 240**, SCACR.
For Sample forms: **Appendix C** to Part II, SCACR Forms.

A motion filed with the appellate court shall be accompanied by the following:

- i. Motion (attached example form)
- ii. Proof of service showing that the motion has been served on all respondents (attached Form 7 in Appendix C to Part II)
- iii. A filing fee as set by order of the Supreme Court: \$50.00

You may send correspondence and filings to the Court by emailing: ctappfilings@sccourts.org

South Carolina Court of Appeals

1220 Senate Street

Columbia, SC 29201

Filings: ctappfilings@sccourts.org

Phone: (803) 734-1890



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