

RECEIVED

MAY 29 2026

SC Court of Appeals

MOTION AND OR  
EXHIBIT TO SHOW MENTAL  
TOLLING FOR CASE: 2023-CP-001735  
SHOULD HAVE BEEN TOLLED UNDER  
15-3-40.



**THEREFORE, IT IS ORDERED:** Because the Department of Mental Health has statutory responsibility for custody and control of individuals determined not guilty by reason of insanity, defendant shall be examined and observed at an appropriate facility of the Department of Mental Health by one or more examiners to determine whether defendant is criminally responsible pursuant to S.C. Code Ann. § 17-24-10(A) (1976) for conduct on or about April 8, 2016.

If defendant is believed to be criminally responsible by the designated examiners, defendant shall be further examined to determine whether, because of mental disease or defect, defendant lacked sufficient capacity to conform conduct to the requirements of the law on or about April 8, 2016 pursuant to S.C. Code Ann. § 17-24-20(A) (1976).

**COMPLIANCE DEADLINE/TRANSPORT FOR EVALUATION.** The examining facility shall schedule the ordered examination as soon as possible and no later than sixty (60) days from the receipt of this order by the Department of Mental Health, this time being necessary to gather required records. If defendant is currently free on bond or personal recognizance, defendant is responsible for making transportation arrangements to attend the examination. In the event defendant does not appear at the scheduled examination, upon written notice of such failure by the Department of Mental Health to the Sheriff of the county in which this case arose, defendant shall be taken into custody by the Sheriff and held until an examination can be scheduled and completed, and thereafter shall be released. Defendant's bond or bail is hereby revoked to the extent necessary to carry out the provisions of this order, and upon completion of the examination and release of defendant, any previous bail or bond issued by the Court shall remain in effect. If defendant is in custody at the time of the scheduled examination, the Sheriff is hereby authorized and required to transport defendant to and from the examination, arriving at the examining facility at the time established by confirmed appointment with the staff of the examining facility. In the event defendant is in custody of a law enforcement agency other than a Sheriff's department, nothing herein prevents such agency from carrying out the provisions of this order.

**PROCEDURE IF LACK OF COMPETENCY IS INDICATED.** If, during the course of the criminal responsibility and capacity to conform evaluation scheduled pursuant to this Order, the examiner finds indications that defendant may not be competent to stand trial



pursuant to S.C. Code Ann. § 44-23-410 (1976) and State v. Blair, 275 S.C. 529, 273 S.E.2d 536 (1981), the examiner shall terminate the criminal responsibility and capacity to conform evaluation, issue no report thereon, and by written communication recommend to the Court that a competency to stand trial evaluation should be ordered. Further, the examiner should state whether, in the examiner's opinion, such lack of competency is due to a mental illness or, in the alternative, mental retardation or a related disability. A copy of this written communication shall be sent to the prosecutor and defense counsel.

**AUTHORIZATION FOR INPATIENT EVALUATION.** In the event examiners from the Department of Mental Health determine defendant requires an inpatient examination, upon written notice to this Court from the director of the Department of Mental Health or his designee, defendant shall be committed to an appropriate facility of the Department of Mental Health for no more than fifteen (15) days for examination and observation related to defendant's criminal responsibility and capacity to conform. If the examination and observation of defendant has not concluded at the end of the initial inpatient fifteen (15) days, defendant may be kept in the continued custody of the Department of Mental Health for an additional period not to exceed fifteen (15) days, provided the director of the examining facility or his designee notifies this Court in writing. The issuance of an additional Court order allowing for the inpatient commitment(s) discussed in this paragraph is not necessary.

**DETENTION BEYOND EVALUATION PERIOD.** If, in the judgment of Department of Mental Health examiners, defendant is in need of immediate hospitalization or inpatient treatment, upon written request to this Court from the director of the examining facility or his designee, defendant may be detained by the Department of Mental Health in a suitable facility for so long as deemed clinically necessary or until a hearing on the matter may be conducted by this Court. An additional Court order **shall** be necessary for ongoing pre-trial inpatient detention of defendant as discussed in this paragraph.

**ACCESS TO EXAMINER'S REPORT.** The Department of Mental Health is an independent entity, conducting this evaluation pursuant to Court order, and is not aligned with any party before the Court. It is the intention of the State of South Carolina to provide defendant an adequate opportunity for mental status investigation when the defendant's mental condition is seriously in question pursuant to Ake v. Oklahoma, 470 U.S. 68, 105 S.Ct. 1087 (1985), either

before or after defendant formally asserts the insanity defense.

The purpose of the following provisions controlling access to the examiner's report is to strike a balance between defendant's right to explore the possibility of an insanity defense and prosecution's right to respond if such defense is raised. If defendant is requesting evaluation prior to asserting the defense of insanity, the evaluation shall be confidential until such time as defendant elects to assert the insanity defense. If defendant or prosecution is requesting evaluation after defendant's formal assertion of the insanity defense pursuant to Rule 5(f) of the South Carolina Rules of Criminal Procedure, or both parties are requesting the evaluation by consent, the evaluation shall **not** be confidential and both defense counsel and the prosecutor shall be provided a copy of the examiner's report. In either case, ownership of the examining agency's files shall be vested with the examining agency.

**(A) Ex parte evaluation requested by defendant prior to assertion of insanity defense.**

If defendant has requested an evaluation to determine whether the insanity defense may be viable, the examiner's report shall not be provided to the prosecution and shall not be admissible as evidence in any Court proceedings. The prosecution may not discover any portion of the evaluation files. Any written report resulting from the evaluation shall be considered confidential and provided only to defense counsel, and shall be provided within ten (10) days of all examinations or the conclusion of the inpatient examination period. Examiners and agency staff may not be compelled to testify regarding statements made during the criminal responsibility and capacity to conform examination for any purpose unless and until defendant asserts the defense of insanity. However, as a condition of accepting the evaluation provided by the State of South Carolina, defendant expressly waives any and all confidentiality privileges associated therewith if defendant subsequently asserts the insanity defense. In such case, the evaluation shall no longer be confidential, and all parties' access to the evaluation report shall be controlled by paragraph (B) below.

**(B) Evaluation requested by either party after assertion of insanity defense.**

Because the assertion of the insanity defense places defendant's mental status at issue, either party may discover any portion of the evaluation files upon presentation of a Court order authorizing such or a release authorization signed by defendant. Both the prosecutor and defense counsel shall be provided a copy of the examiner's report within ten (10) days of the conclusion

of all examinations or the inpatient examination period. The evaluation report may be admissible as evidence in subsequent hearings concerning defendant's criminal responsibility and capacity to conform. However, the report shall be inadmissible in any other proceedings except as expressly permitted by South Carolina law. Examiners and agency staff may not be compelled to testify regarding statements made during the criminal responsibility and capacity to conform examination for any purpose other than on the issue of criminal responsibility and capacity to conform. Also, statements made during the examination may not be used to impeach defendant at trial. Hudgins v. Moore, 337 S.C. 333, 524 S.E.2d 105 (1999).

**(C) Evaluation Requested by Consent of Both Parties.**

By consent, the parties may request evaluation at any time, regardless of whether the insanity defense has been asserted by the defendant. The procedures and rules for this examination shall be the same as outlined in paragraph (B) above; however, in the event defendant does not assert the insanity defense, the examiner's report shall not be admissible for any reason, nor shall the contents of the evaluation files be used for any purpose.

**MEDICAL PROVIDERS/SCHOOLS MUST RELEASE NECESSARY RECORDS.**

Department of Mental Health examiners conducting the evaluation may need clinical and school records concerning defendant to assist in forming an opinion. It is therefore ordered, upon presentation by the Department of Mental Health of this order with a written request for specific records attached thereto, that any physician or clinician, licensed health care facility, licensed health care provider, or any school district is hereby authorized and required to furnish copies of all records concerning defendant to the Department of Mental Health.

**COUNSEL REQUIRED TO FURNISH NECESSARY RECORDS.** Upon written request from the Department of Mental Health, counsel for prosecution and defense shall furnish to the agency such records and information in counsel's possession as the agency requests, including but not limited to copies of law enforcement reports, investigations, witness statements, statements by defendant (both written and electronic), defendant's medical records, and prior psychiatric or psychological evaluations of defendant. Nothing herein shall be construed to require counsel to divulge any information, documents, notes, or memoranda that are protected by attorney-client privilege or work-product doctrine.

**DUTIES OF DEFENSE COUNSEL.** Unless the prosecution is the party moving for



this evaluation, defense counsel has the responsibility to file, serve, and transmit this order as outlined in the final paragraph below. Defense counsel does not have the right to attend any clinical interview scheduled pursuant to this Order, nor does defendant have a constitutional right to compel counsel's attendance. State v. Hardy, 283 S.C. 590, 325 S.E.2d 320 (1985). The Court recognizes, however, that circumstances may arise through which the Department of Mental Health may request counsel's attendance to facilitate the examination. In the event that such a determination is made, the Department of Mental Health may request counsel's attendance in writing, and counsel's level of participation shall be prescribed by the Department of Mental Health's written evaluation protocol. In this event, because of the substantial number of individuals awaiting examination, such interviews cannot be rescheduled, postponed, or canceled to accommodate counsel except upon presentation to the Department of Mental Health of a written statement from a circuit court judge that counsel's attendance is required in Court at the time the examination is scheduled. Whether or not defense counsel is requested to attend the clinical interview, defense counsel must meet with defendant prior to the interview to discuss this Court order, the evaluation process, the clinical interview, defendant's rights with regard to the clinical interview, and penalties associated with non-appearance and non-cooperation. Failure to comply with these requirements may result in sanctions for defense counsel. Defendant's refusal to participate at the interview because of the absence of counsel will be deemed non-cooperation. Failure of defendant to cooperate or participate in the interview may result in cancellation of the interview and examiners being unable to offer an opinion on criminal responsibility and capacity to conform. Failure to cooperate may further result in the case being called for trial without completion of the evaluation, and may result in defendant being prohibited from presenting expert testimony on the issue of insanity or waiver of the insanity defense.

**FILING, SERVICE, AND TRANSMITTAL OF ORDER.** It is the responsibility of counsel for the party requesting the evaluation to file and serve this order as outlined herein. In the event the evaluation has been requested by consent, or the moving party cannot be determined, defense counsel shall be responsible. After being signed by the Court, the original order without attachments shall be immediately filed with the Clerk of Court and a certified copy served upon the opposing party. Further, within five (5) business days, a certified copy of this

order, together with the attachments listed at the end of this order, must be served upon the Department of Mental Health at the address listed below. To expedite commencement of the evaluation process and scheduling of the clinical interview, counsel is instructed to immediately contact the Department of Mental Health to advise of the issuance of this order and forthcoming service upon the agency:

Evaluation Order Service Address for the Department of Mental Health

Forensic Evaluation Service Paralegal  
S. C. Department of Mental Health  
CBHS Forensic Center  
7901 Farrow Road  
Columbia, S.C. 29203-3220  
(803) 935-5540 (Phone)  
(803) 935-5544 (Fax)  
Email: FES-PARALEGAL@SCDMH.ORG

**AND IT IS SO ORDERED.**

  
\_\_\_\_\_  
Presiding Circuit Judge

E. C. GRIFFITH  
\_\_\_\_\_  
Printed Name of Presiding Circuit Judge

McCormick, South Carolina

Dated: Oct. 12, 2015

Al Eargle  
\_\_\_\_\_  
Prosecutor  
187 Saluda Airport Road  
\_\_\_\_\_  
Address  
Saluda  
\_\_\_\_\_  
City, State, Zip  
SC 29138  
\_\_\_\_\_  
Telephone  
864-445-3832  
\_\_\_\_\_  
Email

Bennett Casto  
\_\_\_\_\_  
Defense Counsel  
Post Office Box 1852  
\_\_\_\_\_  
Address  
McCormick  
\_\_\_\_\_  
City, State, Zip  
SC 29835  
\_\_\_\_\_  
Telephone  
864-852-9555  
\_\_\_\_\_  
Email

The following documents must be attached to this order upon submission to the Department of Mental Health:

1. Completed DMH/DDSN Outpatient Information Appointment Sheet
2. Copy of the indictment(s) (if issued)
3. Copy of the arresting agency's incident report
4. Copy of the warrant(s)
5. Law enforcement investigative reports
6. Defendant's statements to law enforcement, written or electronically recorded
7. Witness statements to law enforcement
8. Defendant's school psychological records (if available)
9. Defendant's Rule 5(f) notice of insanity defense (if applicable)
10. Autopsy reports (if applicable)

*SEM*

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**COVERSHEET FOR DMH AND DDSN EVALUATION ORDERS**

1. The Competency to Stand Trial Evaluation orders (SCCA 221 and SCCA 487) and the Criminal Responsibility (McNaughten) Evaluation order (SCCA 222) should **not** be altered. It is important for purposes of compliance with the statutes as well as timeliness, efficiency and quality control in conducting evaluations that the applicable form order be used **exactly** as published, **without alterations or additions** to the terms of the form order.
  
2. Additional records **must** be attached to the order for a complete evaluation. It is the duty of counsel requesting the evaluation to obtain these records in advance and have them ready at the time the judge signs the order so that the evaluation will not be delayed. Within five (5) days of its issuance, counsel must file the order with the Clerk and serve the order on the examining agency. A list of the necessary records is available on the last page of the order, and may include:
  - Completed DMH/DDSN Outpatient Information Appointment Sheet
  - Copy of the indictments(s)
  - Copy of the arresting agency's incident report
  - Copy of the warrant(s)
  - Law enforcement investigative reports
  - The defendant or juvenile's statements to law enforcement, written or electronically recorded
  - Witness statements to law enforcement
  - Autopsy reports
  - Defendant's school psychological records
  - Defendant's Rule 5(f) notice of insanity records
  - Copy of the Juvenile Petition
  - Special education records, including psychological evaluations and IEPs
  - School records, including disciplinary and attendance records
  - Mental health records, including inpatient and outpatient evaluation and/or treatment
  
3. Only **one** Competency to Stand Trial evaluation can be ordered. For Defendants with mental illness, the order is addressed to the Department of Mental Health. For Defendants with mental retardation, the order is addressed to the Department of Disabilities and Special Needs. The order may not be addressed to both agencies. In the event there is a dual diagnosis or uncertainty as to the correct diagnosis, the order is first addressed to the Department of Mental Health, and the examiners will determine whether further referral is necessary. All orders for criminal responsibility evaluation, regardless of the diagnosis, are forwarded to the Department of Mental Health.



STATE OF SOUTH CAROLINA  
COUNTY OF MCCORMICK

The State of South Carolina,

Plaintiff

v.

BRYANTAVIO MURRAY

Defendant.

RECEIVED

MAY 29 2026

SC Court of Appeals

IN THE COURT OF GENERAL SESSIONS

Indictment No.(s):

A/Warrant No.(s): 2016A3510100062, 63, 64

ORDER FOR COMPETENCY TO STAND  
TRIAL EVALUATION PURSUANT TO  
STATE V. BLAIR

EVALUATION BY  
(Select Only One)

Department of Mental Health (Mental Illness)

OR

Department of Disabilities and Special Needs  
(Mental Retardation or Related Disability)

FILED  
GWENDDOLYN D. CHILES  
CLERK OF COURT  
MCCORMICK COUNTY, SC  
2016 OCT 19 P 3:05

This matter is before me for an order requiring defendant Bryantavio Murray, charged with Carring or concealina a weapon by a inmate, Attempted murder, Possession of a weapon during a violent crime, to submit to an evaluation for competency to stand trial pursuant to State v. Blair, 275 S.C. 529, 273 S.E.2d 536 (1981) and S.C. Code Ann. § 44-23-410 (1976).

**BASIS FOR ORDER.** I have considered the showing made in support of the motion requesting this evaluation and have reason to believe defendant may lack the competency to understand the criminal proceedings or to assist with the defense as a result of a lack of mental competence.

This order is issued for the following reasons:

Based upon Defense Counsel's Request, due to conversation with his client.

**THEREFORE, IT IS ORDERED:** Defendant shall be examined and observed at an appropriate facility by two examiners of the Department of Mental Health if suspected of having a mental illness or by two examiners designated by the Department of Disabilities and Special Needs if suspected of having mental retardation or a related disability, to render an opinion whether defendant is competent to stand trial.

**COMPLIANCE DEADLINE/TRANSPORT FOR EVALUATION.** The examining facility shall schedule the ordered examination no later than thirty (30) days from the examining agency's receipt of this order. If defendant is currently free on bond or personal recognizance,

defendant is responsible for making transportation arrangements to attend the examination. In the event defendant does not appear at the scheduled examination, upon written notice of such failure by the examining agency to the Sheriff of the county in which this case arose, defendant shall be taken into custody by the Sheriff and held until an examination can be scheduled and completed, and thereafter shall be released. Defendant's bond or bail is hereby revoked to the extent necessary to carry out the provisions of this order, and upon completion of the examination and release of defendant, any previous bail or bond issued by the Court shall remain in effect. If defendant is in custody at the time of the scheduled examination, the Sheriff is hereby authorized and required to transport defendant to and from the examination, arriving at the examining facility at the time established by confirmed appointment with the staff of the examining facility. In the event defendant is in custody of a law enforcement agency other than a Sheriff's department, nothing herein prevents such agency from carrying out the provisions of this order.

**TRANSFER TO ALTERNATE AGENCY.** If the initial examination is performed by the Department of Mental Health, and examiners find indications of mental retardation or a related disability but not mental illness, the Department of Mental Health shall not render an opinion on mental competency, but shall inform the Court, prosecutor, and defense counsel that defendant is "not mentally ill" and shall provide a copy of such notification and a copy of this order to the Department of Disabilities and Special Needs. Likewise, if the initial examination is performed by the Department of Disabilities and Special Needs, and examiners find indications of mental illness but not mental retardation or a related disability, the Department of Disabilities and Special Needs shall not render an opinion on mental competency, but shall inform the Court, prosecutor, and defense counsel that defendant does "not have mental retardation or a related disability" and shall provide a copy of such notification and this order to the Department of Mental Health.

In either case, the examining agency shall make copies of any records gathered or created in connection with its examination available to examiners designated by the alternate agency, and the alternate agency shall thereafter designate examiners to evaluate defendant as to competency to stand trial within thirty (30) days of receipt of the notification from the initial examining agency.

**FINDING OF DUAL DIAGNOSIS.** If examiners of either the Department of Mental Health or the Department of Disabilities and Special Needs find an indication of a dual diagnosis of mental illness and mental retardation or a related disability, no opinion on defendant's mental

competency shall be rendered, and the dual diagnosis must be reported to the Court, prosecutor, and defense counsel. The examining agency shall also provide notification of the finding and a copy of this order to the other agency. Thereafter, the Department of Mental Health and the Department of Disabilities and Special Needs shall arrange for an examiner from each agency to further evaluate defendant to render a final report on defendant's mental competency. Both agencies are authorized and required to make copies of all relevant records within their possession or control available to examiners for purposes of completing the dual evaluation.

**AUTHORIZATION FOR INPATIENT EVALUATION.** In the event examiners from either agency determine defendant requires an inpatient examination, upon written notice to this Court from the director of the examining agency or his designee, defendant shall be committed to an appropriate facility of the requesting agency for no more than fifteen (15) days for examination and observation related to defendant's mental competency to stand trial.

**REQUEST FOR EXTENSION.** Before the expiration of the examination period or the examination and observation period, the Department of Mental Health or the Department of Disabilities and Special Needs, as appropriate, may apply to a judge designated by the Chief Justice of the South Carolina Supreme Court for an extension of time up to fifteen (15) days to complete the examination or the examination and observation.

**DETENTION BEYOND EVALUATION PERIOD.** If, in the judgment of the designated examiners, defendant is in need of immediate hospitalization or inpatient treatment, upon written request to this Court from the director of the examining facility or his designee, defendant may be detained by the requesting agency in a suitable facility for so long as deemed clinically necessary or until a hearing required and provided by S.C. Code Ann. § 44-23-430 (1976) may be conducted by this Court. An additional Court order **shall** be necessary for ongoing pre-trial inpatient detention of defendant as discussed in this paragraph.

**ISSUANCE AND ADMISSIBILITY OF WRITTEN REPORT.** Within ten (10) days of all examinations or the conclusion of the observation period, a written report shall be made to the Court pursuant to S.C. Code Ann. § 44-23-420 (1976). A copy of the report shall also be forwarded to the prosecutor and defense counsel. This evaluation report shall be admissible as evidence in subsequent hearings pursuant to S.C. Code Ann. § 44-23-420(c) (1976); thus, the report is a statutory exception to the rule against hearsay and shall be admissible without need for foundational

testimony. However, the report shall be inadmissible in any other proceedings except as expressly permitted by South Carolina law.

**OWNERSHIP AND DISCOVERABILITY OF EXAMINING AGENCY FILES.** The examining agency is an independent entity, conducting this evaluation pursuant to Court order, and is not aligned with any party before the Court. To promote full disclosure and to assure the cooperation of defendant during the evaluation process, ownership of the examining agency's files shall be vested with the examining agency, including clinician's notes, staff reports, evaluation documents, memoranda, test results, etc. Neither these files nor any of their contents shall be provided to any party except upon presentation of a Court order authorizing such or a release authorization signed by defendant. In the event the examining agency's evaluation opinion is contested, an examiner may be appropriately and fully questioned as to the basis for the examiner's opinion at any hearing pursuant to S.C. Code Ann. § 44-23-430 (1976). However, examiners and agency staff may not be compelled to testify regarding statements made during the competency examination for any purpose other than to establish competency. Also, statements made during the examination may not be used to impeach defendant at trial. Hudgins v. Moore, 337 S.C. 333, 524 S.E.2d 105 (1999).

**MEDICAL PROVIDERS/SCHOOLS MUST RELEASE NECESSARY RECORDS.** State agency examiners conducting the evaluation may need clinical and school records concerning defendant to assist in forming an opinion. It is therefore ordered, upon presentation by the examining agency of this order with a written request for specific records attached thereto, that any physician or clinician, licensed health care facility, licensed health care provider, or any school district is hereby authorized and required to furnish copies of all records concerning defendant to the Department of Mental Health or the Department of Disabilities and Special Needs, or both.

**COUNSEL REQUIRED TO FURNISH NECESSARY RECORDS.** Upon written request from the examining agency, counsel for the prosecution and defense shall furnish to the agency such records and information in counsel's possession as the agency requests, including but not limited to copies of law enforcement reports, investigations, witness statements, statements by defendant (both written and electronic), defendant's medical records, and prior psychiatric or psychological evaluations of defendant. Nothing herein shall be construed to require counsel to divulge any information, documents, notes, or memoranda that are protected by attorney-client privilege or work-product doctrine.



**DUTIES OF DEFENSE COUNSEL.** Unless the prosecution is the party moving for this evaluation, defense counsel has the responsibility to file, serve, and transmit this order as outlined in the final paragraph below. Defense counsel does not have the right to attend any clinical interview scheduled pursuant to this Order, nor does defendant have a constitutional right to compel counsel's attendance. State v. Hardy, 283 S.C. 590, 325 S.E.2d 320 (1985). The Court recognizes, however, that circumstances may arise through which the examining agency may request counsel's attendance to facilitate the examination. In the event that such a determination is made, the examining agency may request counsel's attendance in writing, and counsel's level of participation shall be prescribed by the examining agency's written evaluation protocol. In this event, because of the substantial number of individuals awaiting examination, such interviews cannot be rescheduled, postponed, or canceled to accommodate counsel except upon presentation to the examining agency of a written statement from a circuit court judge that counsel's attendance is required in Court at the time the examination is scheduled. Whether or not defense counsel is requested to attend the clinical interview, defense counsel must meet with defendant prior to the interview to discuss this Court order, the evaluation process, the clinical interview, defendant's rights with regard to the clinical interview, and penalties associated with non-appearance and non-cooperation. Failure to comply with these requirements may result in sanctions for defense counsel. Defendant's refusal to participate at the interview because of the absence of counsel will be deemed non-cooperation. Failure of defendant to cooperate or participate in the interview may result in cancellation of the interview, examiners being unable to offer an opinion on competency to stand trial, and the case being called for trial without completion of the evaluation.

**FILING, SERVICE, AND TRANSMITTAL OF ORDER.** It is the responsibility of counsel for the party requesting the evaluation to file and serve this order as outlined herein. In the event the evaluation has been requested by consent, or the moving party cannot be determined, defense counsel shall be responsible. After being signed by the Court, the original order without attachments shall be immediately filed with the Clerk of Court and a certified copy served upon the opposing party. Further, within five (5) business days, a certified copy of this order, together with the attachments listed at the end of this order, must be served upon the examining agency at the address listed below. To expedite commencement of the evaluation process and scheduling of the clinical interview, counsel is instructed to immediately contact the examining agency to advise of the



issuance of this order and forthcoming service upon the agency:

**Evaluation Order Service Information**

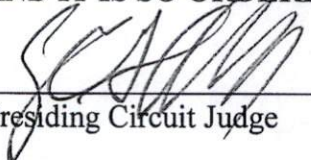
Department of Mental Health.

Forensic Evaluation Service Paralegal  
S. C. Department of Mental Health  
CBHS Forensic Center  
7901 Farrow Road  
Columbia, S.C. 29203-3220  
(803) 935-5540 (Phone)  
(803) 935-5544 (Fax)  
Email: FES-PARALEGAL@SCDMH.ORG

Department of Disabilities and Special Needs

Office of Clinical Services  
Department of Disabilities and Special Needs  
Post Office Box 4706  
Columbia, S.C. 29240  
(803) 898-9694 (Phone)  
(803) 898-9660 (Fax)  
Email: OBSForensics@ddsn.sc.gov

**AND IT IS SO ORDERED.**

  
\_\_\_\_\_  
Presiding Circuit Judge

E.C. GRIFFITH  
\_\_\_\_\_  
Printed Name of Presiding Circuit Judge

McCormick, South Carolina

Dated: Oct. 12, 2018

Al Eargle  
\_\_\_\_\_  
Prosecutor  
187 Saluda Airport Road  
\_\_\_\_\_  
Address  
Saluda, South Carolina 29138  
\_\_\_\_\_  
City, State, Zip  
864-445-3832  
\_\_\_\_\_  
Telephone  
\_\_\_\_\_  
Email

Bennett Casto  
\_\_\_\_\_  
Defense Counsel  
Post Office Box 1852  
\_\_\_\_\_  
Address  
McCormick, South Carolina 29835  
\_\_\_\_\_  
City, State, Zip  
864-852-9555  
\_\_\_\_\_  
Telephone  
self@wctel.net  
\_\_\_\_\_  
Email

The following documents must be attached to this order upon submission to the Department of Mental Health or to the Department of Disabilities and Special Needs whichever is applicable:

1. Completed DMH/DDSN Outpatient Information Appointment Sheet
2. Copy of the indictment(s) (if issued)
3. Copy of the arresting agency's incident report
4. Copy of the warrant(s)
5. Law enforcement investigative reports
6. Defendant's statements to law enforcement, written or electronically recorded
7. Witness statements to law enforcement
8. Defendant's school psychological records (if available)
9. Autopsy reports (if applicable)



Bryantavious K. Murray  
Steven Michael Pruitt, Esquire  
The Honorable Gwendolyn D. Chiles  
The Honorable R. Lawton McIntosh

**FILED**  
**Jan 13 2025**

SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH

Authorization to Disclose SCDMH Protected Health Information

\* I, Bryantavious Murray, at 2156 Cresthill Drive Columbia S.C. 29223

Date of Birth: 04/07/1994 SSN: 251-93-6372

Authorize the release of my SCDMH health information, as specified below, for the following purpose: MENTAL EVALUATION

I authorize the release of the following information for the time period from: 2018 to 2018

Information from (name of specific Mental Health Center(s), SCDMH Hospital(s), SCDMH Nursing Facility(ies) or SCDMH Program(s)): SCDMH forensic evaluation center

And the information authorized to be released includes:

- Clinical Assessment
 Clinical Service Notes / Progress Notes
 Admission and Discharge Dates, Diagnosis (Face Sheet)
 Treatment Plan (Plan of Care)
 Discharge Summary (Summary of Treatment)
 Medication / Physician's Medication Orders
 History and Physical
 Psychiatric Evaluation (PMA)
 Billing and Payment Information
 Alcohol and Drug Information
 Written Summary (copy attached)
 Progress Summaries
 HIV Information
 Continuity of Care Clinical Data
 Other (specify): 2018 mental eval with A.H.B. Castro

\* This information should be released to:

Name: Bryantavious Murray

Address: 2156 Cresthill Drive Columbia S.C. 29223

Telephone No.: 864-808-8439

Fax Number: \_\_\_\_\_

Relationship: me

I understand that the above information is protected by applicable law and if this form is not complete, SCDMH may not be able to release the information. I understand that the information may include alcohol/drug abuse and/or HIV/AIDS/ARC and other infectious disease information about me. I do not want the following information disclosed:

This Authorization is valid for one year from my signing unless an earlier date, condition or event is specified here:

I understand that information disclosed may be subject to re-disclosure by the entity name above. I understand that I may refuse to sign this Authorization and my refusal will not limit my access to SCDMH treatment or other services. I also understand that applicable law may permit or require the use, disclosure or re-disclosure of information about me without my Authorization.

\* Bryantavious K. Murray Signature of Patient / Personal Representative \* Bryantavious Murray Printed Name \* 06/27/2025 Date

Authority if signed by Personal Representative: \_\_\_\_\_

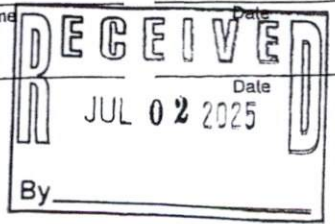
Signature of SCDMH Staff Releasing Information Printed Name Method of Release Date Released

REVOCAION STATEMENT

I understand that I may revoke this authorization at any time, and will be asked to sign the revocation statement on this form in order to rescind this authorization. I understand that if I cancel this Authorization, SCDMH cannot take back any use or release made with my Authorization.

"I do hereby request that this authorization to disclose health information be Rescinded"

Effective Date Signature Printed Name Witness Signature Printed Name



**South Carolina Department of Mental Health**  
**Division of Inpatient Services**  
**Letter Regarding Information Requested**

TO: Patient DATE: 07/02/2025

PATIENT NAME: Bryantavious Murray MEDICAL RECORD NUMBER: \_\_\_\_\_

FROM: **Health Information Services**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> G. Werber Bryan Psychiatric Hospital<br>220 Faison Dr., Columbia, S.C. 29203<br>Phone No. 803-935-7303/Fax 803-935-5535                        | <input type="checkbox"/> William S. Hall Child and Adolescent Services<br>220 Faison Dr., Columbia, S.C. 29203<br>Phone No. 803-898-1803/Fax 803-898-1632              | <input type="checkbox"/> C.M. Tucker Nursing Care Center<br>2200 Harden St., Columbia, S.C. 29203<br>Phone No. 803-737-5300/Fax 803-737-5286 |
| <input type="checkbox"/> Morris Village Alcohol & Drug Addiction<br>Treatment Center<br>610 Faison Dr., Columbia, S.C. 29203<br>Phone No. 803-935-6436/Fax 803-935-6414 | <input checked="" type="checkbox"/> BPH/Forensic<br>7901 Farrow Rd., Columbia, S.C. 29203<br>Phone No. <del>803-935-5657</del> Fax 803-935-5584<br><u>803.935.5520</u> | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Patrick B. Harris Psychiatric Hospital<br>P.O. Box 2907, Anderson, S.C. 29622<br>Phone No. 864-965-9725/Fax 864-225-4767                       | <input type="checkbox"/> Sexual Violent Predator Treatment Programs<br>7901 Farrow Rd., Columbia, S.C. 29203<br>Phone No. 803-935-5657/Fax 803-935-5584                |  |

1. \_\_\_\_\_ The charge for the reproduction of records requested is \$ \_\_\_\_\_ Including Postage fee \$ \_\_\_\_\_ .  
Please make Check payable to \_\_\_\_\_ and mail attention: **Health Information Services**.  
Current charges for reproduction of records are \$0.65 per page for pages 1-30, \$0.50 per page for all other additional pages. Clerical fee allowable cost \$25.00. The maximum for combined clerical fee and per page fee is \$150.00 for electronic requests and \$200.00 for paper requests. Upon receipt of payment, the requested information will be forwarded.
2. \_\_\_\_\_ Based on the information in your request, there is no record of treatment.
3. \_\_\_\_\_ Please provide the following information to assist in patient identification.  
Name when hospitalized \_\_\_\_\_ Additional names (including nicknames) \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Race \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_
4. \_\_\_\_\_ The following information is released to you and should not be re-disclosed:
- |   |  |   |   |   |
|---|--|---|---|---|
| <input type="checkbox"/> Medical Abstract | <input type="checkbox"/> Discharge Summary | <input type="checkbox"/> History & Physical | <input type="checkbox"/> Psychological Evaluation | <input type="checkbox"/> Progress Notes |
| <input type="checkbox"/> Social History   | <input type="checkbox"/> Consult           | <input type="checkbox"/> Doctors Orders     | <input type="checkbox"/> Labs                     | <input type="checkbox"/> I & S Sheet    |
| <input type="checkbox"/> Other _____      |  |   |   |   |
5. \_\_\_\_\_ The authorization received is being returned due to the fact that it does not meet State laws (45 CFR Part 160 (HIPAA)) and/or Federal laws and regulations (42 CFR part 2) necessary for the disclosure of alcohol/drug, HIV/AIDS/ARC and/or mental health records. Enclosed is a partially completed SCDMH authorization which is compliant. Please have the above named individual complete, sign and date it. Be sure to specify exactly what is being requested from the record. Then either mail or fax to the above appropriate address.
6. \_\_\_\_\_ Enclosed is a partially completed SCDMH authorization. Please have the above named individual complete, sign and date it. Be sure to specify exactly what is being requested from the record. Then either mail or fax to the above appropriate address.
7. \_\_\_\_\_ Enclosed is a partially completed SCDMH authorization. Please complete, sign and date it. Return the completed authorization along with a copy of the Certificate appointment as Personal Representative.
8. \_\_\_\_\_ Forensic evaluations are subject to additional restrictions on disclosure while a defendant's case is pending. Therefore forensic evaluations may only be disclosed with written authorization of the person evaluated or upon receipt of a court order by a court of competent jurisdiction. Enclosed is a partially completed SCDMH authorization. Please have the above named individual complete, sign and date it. Return the completed authorization to the above appropriate address.
9.  Other Is this package it will contain two evaluations.

Shanice Grant  
Health Information Services  
Department

The attached or enclosed information has been disclosed to you from records whose privacy is protected from disclosure by federal and state law including, as applicable, 45 CFR Part 160 (HIPAA); 42 CFR Part 2, (Alcohol and Drug Treatment) and Section 44-22-100, Code of Laws of South Carolina. The applicable law or laws may prohibit you from making any further disclosure without the specific written authorization by the individual to whom it pertains or their authorized representative, or as otherwise permitted or required by law. A general authorization for release of information is not sufficient for this purpose unless it conforms to the specific requirements of the applicable law or laws. Further disclosure not in accordance with applicable federal and law may result in civil and / or criminal penalties.

CAPACITY TO STAND TRIAL EVALUATION  
FORENSIC EVALUATION SERVICE  
SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH (SCDMH)

NAME: Bryantavious Murray

DATE OF BIRTH: April 7, 1994

DATE OF REPORT: December 3, 2018

PRESIDING: Katie M. Chambers, M.D.  
Fellow in Forensic Psychiatry  
University of South Carolina School of Medicine

SECOND EXAMINER: Elizabeth Dawn Whetstone, LISW-CP

OTHERS PRESENT: Marcus Bethurem, M.D.  
General Psychiatry Resident  
University of South Carolina School of Medicine

PSYCHIATRIC DIAGNOSES:

Antisocial Personality Disorder  
Cannabis Use Disorder, in a controlled environment

OPINION REGARDING CAPACITY TO STAND TRIAL: Mr. Murray currently has the capacity to stand trial.

DISPOSITION: Mr. Murray was returned to South Carolina Department of Corrections (SCDC) at the conclusion of this evaluation.

IDENTIFYING INFORMATION: Bryantavious Murray is a 24 year-old African American male who was seen at the Forensic Evaluation Service pursuant to a court order from the McCormick County Court of General Sessions. This court order requested an evaluation of his competency to stand trial pursuant to State vs. Blair, 275 S.C. 529, 273 S.E. 2d 536 (1981) and S. C. Code Ann. §44-23-410 (1976). He is currently charged with Carrying or Concealing a Weapon by an Inmate, Attempted Murder, and Possession of a Weapon during a Violent Crime. According to the court order, this request was issued for the following reason: "Based upon Defense Counsel's Request, due to conversation with his client."

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Prior to participating in the examination, Mr. Murray was warned regarding the limitations of confidentiality. He was informed that this evaluation was court ordered. He was informed that the evaluators were employed by the South Carolina Department of Mental Health and were not being paid by his attorney or the solicitor in his case. He was informed that after the evaluation was completed a report would be submitted to his attorney, the solicitor, and the judge in his case. Finally, he was informed that the evaluators could be called to court to testify at a hearing related to his competency to stand trial. He was able to answer questions regarding this information correctly and he voluntarily agreed to participate in the evaluation.

#### SOURCES OF INFORMATION:

1. Court order from the McCormick County Court of General Sessions requesting the evaluation dated October 12, 2018.
2. McCormick County Court of General Sessions Indictments for Attempted Murder, Possession of a Weapon during a Violent Crime, and Carrying or Concealing A Weapon by Inmates dated September 7, 2016.
3. Arrest warrant 2016A35101000063 for Murder/Attempted Murder dated April 11, 2016.
4. Arrest warrant 2016A35101000062 for Prisoners/Carrying or concealing weapon by inmates dated April 11, 2016.
5. Arrest warrant 2016A35101000064 for Possession of a weapon during a violent crime dated April 11, 2016.
6. South Carolina Department of Corrections (SCDC) Arrest Warrant Affidavit Sheet for case number 32-2016-042 dated July 5, 2016.
7. SCDC Investigative Report for case number 32-2016-042 dated April 8, 2016.
8. SCDC Incident Report by Lt. James Thompkins dated April 8, 2016.
9. SCDC Incident Report by Mr. Joseph Stevens dated April 8, 2016.
10. SCDC Incident Report by Ms. Rhodesia Taylor dated April 8, 2016.
11. SCDC Incident Report by Lt. Cook dated April 8, 2016.
12. SCDC Incident Report by Lt. G. Rice dated April 8, 2016.
13. SCDC Incident Report by Vera E. Courson, RN dated April 8, 2016.
14. Voluntary Statement provided by Mr. Joseph Stevens dated April 8, 2016.
15. Voluntary Statement provided by Ms. Rhodesia Taylor dated April 8, 2016.
16. SCDC Evidence/Chain of Custody report dated April 8, 2016.
17. SCDC Offender Management System Inmate Offense History dated May 31, 2016.
18. SCDC Inmate Search Detail Report on Bryantavious Murray.
19. William S. Hall Psychiatric Institute (Columbia, SC) medical records from January 17, 2002 to March 3, 2002.
20. Beckman Mental Health Center medical records (Greenwood, SC) from April 29, 2009 to December 11, 2013.
21. Greenwood County Detention Center Records from September 11, 2002 to March 23, 2013.

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22. South Carolina Department of Mental Health (SCDMH) Episodes of Care Report (date unknown).
23. SCDC medical records from November 2017 to December 2018.
24. Competency to Stand Trial and Criminal Responsibility/Capacity to Conform evaluations performed by Brandi P. Justice, Psy.D. conducted on May 2, 2013 and May 31, 2013.
25. Department of Juvenile Justice (DJJ) records from June 14, 2007 to August 26, 2011.
26. Self Regional Healthcare (Greenwood, SC) medical records dated from April 8, 2016.
27. Telephone interview with nursing and mental health staff (Inmate's Counselor- Last name: Pelfrey) at South Carolina Department of Corrections conducted on December 3, 2018 for approximately ten minutes.
28. Clinical forensic interview with the defendant conducted on December 3, 2018 for approximately 1 hour and 30 minutes duration.

SCDMH Forensic Evaluation Service social work assessment could not be conducted due to a lack of contact information for a next of kin.

We reserve the right to alter our opinion should further information become available.

**CURRENT PSYCHIATRIC HISTORY:** Mr. Murray reported feeling "good" on the day of this evaluation. He denied having physical complaints. The defendant indicated that he has been in the F-1 dorm at Kirkland Correctional Institution (KCI) for the past three months. Mr. Murray stated that he was placed in the F-1 dorm because of his "long history of mental illness and been on a lot of drugs." The defendant reported that he was most recently at Allendale Correctional Institution prior to being hospitalized at Gilliam Psychiatric Hospital (GPH) for psychiatric treatment; he was sent to an intermediate level of care (which is located at F-1 dorm at KCI) after being discharged from GPH. He stated that he is currently taking the following medications: buspirone (Buspar<sup>®</sup>, an anti-anxiety medication); risperidone (Risperdal<sup>®</sup>, an antipsychotic); benztropine (Cogentin<sup>®</sup>, a medication used to alleviate side effects from antipsychotics); and metoprolol (an anti-hypertensive).

Mr. Murray reported that his sleep and appetite are "good." He mentioned that he spends his day "walking around the 'rock' and watching TV." The defendant stated that he is in a cell by himself. Mr. Murray denied having problems with detention center staff or peers. He indicated that he has declined visitors, stating "since I get out in two years, I don't want any visitors." The defendant mentioned that he writes letters to a childhood friend. He stated that he has good social support from his family.

The defendant reported that he feels fidgety and "paranoid about being in a small room." He described his mood as "good"; he denied experiencing symptoms of depression. Mr. Murray denied current suicidal or homicidal ideation. He stated that he does experience "hearing voices all day, every day." The defendant reported that the voices are "like people talking to me." He mentioned that he does not know who the voice is and that there are

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different voices. Mr. Murray indicated that the voices "say everything." He also reported "seeing things shoot past me...they shoot through the vent and into the radio and I can hear them through the waves in the radio." He informed the evaluator that he copes with these hallucinations by ignoring them or turning his radio to a loud volume.

Recent medical records from SCDC revealed that the inmate has not displayed mood or symptoms for the past several months. He is prescribed Risperdal®. SCDC records noted that the inmate "does not appear delusional when discussing legal matters." Mr. Murray has reported to SCDC staff that he is "not mentally ill and did not need to take medications" at times. SCDC records also indicated that the defendant has a history of making suicidal statements for purposes of obtaining a desired outcome. For example, on September 9, 2018, Mr. Murray stated that he made suicidal statements because he "didn't want to be at [F-1 dorm] any longer." On September 26, 2018 he was noted to made suicidal statements; he reported "I'm hearing voices telling me to kill myself. I want to go to GPH." SCDC medical records document no evidence of the defendant displaying disorganized thought process, displaying disorganized behaviors, or possessing fixed false beliefs (i.e. delusions) when he reports experiencing auditory hallucinations. He has had no evidence of recent abnormal behavior.

A telephone interview with nursing and mental health staff at Kirkland Correctional Institute revealed that he is prescribed the following medications: buspirone; risperdone; benztropine; metoprolol; and Vitamin D. He has remained compliant with his medication. He has not engaged in self-harm behaviors or disruptive behaviors. There is no evidence of symptoms of mania or psychosis. There was no evidence of disturbed thought process or thought content. His counselor at SCDC described his demeanor as "well."

**PAST PSYCHIATRIC HISTORY:** Mr. Murray reported that he has had behavior problems since he was four years old. He reported being diagnosed with ADHD (Attention Deficit/Hyperactivity Disorder) and prescribed a stimulant medication during childhood. SCDMH records indicated that this medication was not helpful for the defendant.

Mr. Murray stated that his first psychiatric hospitalization occurred when he was seven years old at William S. Hall. He indicated that he had another psychiatric hospitalization at the same facility one year later. Mr. Murray reported that he had outpatient mental health treatment at Beckman Mental Health Center as a child and again in 2012 when he was in the county jail.

Mr. Murray denied experiencing symptoms of depression in the past. He mentioned that he started cutting himself between the ages of 22 to 24 because of being on "lockup status"; the defendant added that "They wouldn't let me off lockup and it was getting to me. So, I drew blood to make them work a little." He denied other past suicide attempts or self-harm behaviors.

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He denied experiencing symptoms of mania outside of his illicit substance use. The defendant reported a history of aggression his "whole life." He indicated that he has experienced auditory and visual hallucinations for several years. Mr. Murray denied experiencing side effects to psychiatric medications currently or in the past.

A review of available medical records revealed the following:

SCDMH Episodes of Care report revealed that the Mr. Murray was first hospitalized at William S. Hall from January 17, 2002 to March 3, 2002. This report indicated that Mr. Murray intermittently sought outpatient mental health treatment at Beckman Mental Health Center from March 8, 2000 to December 11, 2013. He has received various diagnoses from SCDMH: Attention Deficit Hyperactivity Disorder (ADHD); Conduct Disorder, child onset type; Oppositional Defiant Disorder; Depression Not Otherwise Specified; Mood Disorder Not Otherwise Specified; and Psychosis Not Otherwise Specified.

At age seven, the defendant was hospitalized at William S. Hall Psychiatric Institute (WSHPI) in 2002 for "a danger to others." Mr. Murray had an altercation with a peer and then hit his principal, resulting in an admission to WSHPI. He had a history of hitting his principal several times. The defendant had a history of multiple fights as well as multiple suspensions from school. At the time of this admission to the hospital, he had been expelled from school. These records indicated that Mr. Murray had a history of aggression and behavior problems in school. During this hospitalization, the defendant's behavior was described as "difficult to control"; he kicked two staff members. Mr. Murray was described as "rude" and had "numerous altercations with peers." The defendant had to be placed on ward restrictions for a significant portion of this hospitalization due his behavior problems. There was no evidence of symptoms of mania or psychosis. There was no evidence of disturbed thought process or thought content. Mr. Murray denied experiencing auditory or visual hallucinations. He was prescribed medications to control his aggression and reduce his disruptive behaviors: paroxetine (Paxil®, an antidepressant); risperidone; and oxcarbazepine (Trileptal®, a mood stabilizer). Mr. Murray was diagnosed with "Oppositional Defiant Disorder, Depressive Disorder Not Otherwise Specified and ADHD by history". He was discharged home with a follow-up appointment at Beckman Mental Health Center on March 13, 2002. Due to SCDMH medical records retention policy, Beckman Mental Health Center medical records prior to 2009 were not available.

Mr. Murray was referred by the Department of Juvenile Justice (DJJ) to Beckman Mental Health Center around April 29, 2009; he was 14 years old. Mr. Murray reported experiencing auditory hallucinations and visual hallucinations of "little men". There was no evidence of disorganized thought process, disorganized behaviors, or delusional beliefs. These records indicated that he had charges as a juvenile for assault and battery of a high and aggravated nature resulting from choking a child until that child passed out. He has been suspended from alternative school. The defendant had a long history of disruptive behavior and behavior problems in school. Mr. Murray was placed in special education classes for behavioral problems; there was no evidence of intellectual disability (mental

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retardation). His mother reported that her primary concerns were his aggression and mood lability at that time. There was no evidence of the defendant displaying symptoms of mania or depression; however, he was prescribed oxcarbazepine at this appointment.

Mr. Murray was seen for follow-up appointments at Beckman Mental Health Center on June 3, 2009 and October 8, 2009. These records noted that his behavior problems and aggression improved with Trileptal®. There was no evidence of mania or psychosis. There was no report of disturbed thought content or process. During his last encounter with Beckman Mental Health Center on March 4, 2013, Mr. Murray had a chief complaint of "I need help so I won't see the little men or hear them talking anymore." He was not taking medication at this time. The defendant reported "hearing voices...all types...sometimes tell [me] [I'm] stupid; voices get stronger when [I] get angry." He was discharged from the mental health center due to being incarcerated. These records indicated that the defendant was prescribed haloperidol (Haldol®, an antipsychotic) and this medication would be continued when he was incarcerated at SCDC.

Records from DJJ revealed behavioral problems to include fighting, disorderly conduct, being disrespectful, and out of place at times. The defendant was also noted to be aggressive and threatening towards peers and staff while in the custody of DJJ. He received a Comprehensive Psychological Evaluation in 2007 and again in 2010. His intelligence was noted to be in the average range. Mr. Murray had no evidence of symptoms of mania, depression, or psychosis. There was no evidence of disturbed thought process or thought content. The defendant was recommended for substance use treatment for his regular alcohol and marijuana use. DJJ records reported that Mr. Murray was diagnosed with ADHD, Conduct Disorder, Cannabis Abuse, and Rule Out Alcohol Abuse.

Medical records from Greenwood County Detention Center reported that Mr. Murray described visual hallucinations which were atypical of genuine and persistent mental illness. For example, he stated that he saw "a midget in his cell telling him to jump in a pot of gold head first." However, he was prescribed an antipsychotic (Haldol®). Mr. Murray reported that this medication was "too strong" and refused to take it; several days later, he stated that this medication was not strong enough. An incident report at the detention center dated February 24, 2013 noted "Be careful when dealing with Murray he is trying to play crazy."

Disciplinary records from Greenwood County Detention Center revealed that the defendant had multiple incidents of threatening others and displaying aggressive behavior towards other inmates and staff. Mr. Murray indicated that the only way he could "get something done" was to make threats of self-harm. He was noted to have other behavioral problems to include taking others' food, flooding his cell, indecent exposure, yelling for a non-emergency, being disrespectful, attempting to throw urine on officers, and failing to follow orders.

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A review of South Carolina Department of Corrections (SCDC) revealed that the defendant has received various diagnoses prior to March 2018: Substance Induced Psychotic Disorder, Cannabis Use Disorder, Antisocial Personality Disorder, and Other Specified Schizophrenia Spectrum and Other Psychotic Disorder.

On March 14, 2018, Mr. Murray was diagnosed with Bipolar Disorder because he was observed to be talking fast, complained of auditory hallucinations, observed to have an elevated mood, and displayed tangential thought process. He was prescribed a mood stabilizer at that time. The defendant was noted to have "loose thought process" but was easily able to "get back on track" at times. Group therapy notes from March 14, 2018 did not document evidence of abnormal behavior. When he was seen by mental health on March 28, 2018, mental health staff opined that he was "likely paranoid because he wouldn't make eye contact but did not appear overtly psychotic" at this time. After complaining of hallucinations and being described as "distracted and tangential", Mr. Murray was prescribed risperidone (an antipsychotic).

The defendant appeared to worsen in May 2018 as evidenced by deterioration in his hygiene and disorganized thought process. He was described as "floridly psychotic" in SCDC records. However, during today's evaluation, he reported that he heavily used cannabis in May 2018 prior to his admission to Gilliam Psychiatric Hospital (GPH) for psychiatric treatment in May 2018. He reported that his last use of marijuana was in May 2018 while he was in Allendale Correctional Institution prior to being transferred to GPH.

The defendant mentioned that, prior to being transferred to GPH, another inmate "told me to suck his private parts. So, I got me a knife and was going to cut his face. They put me on lock up and I smoked a lot of reefer to handle lockup." When he arrived at GPH in May 2018, Mr. Murray displayed symptoms of mania and psychosis. However, his symptoms improved after several days when he did not have access to illicit substances.

**ALCOHOL AND DRUG USE HISTORY:** The defendant indicated that he first used marijuana at age 10. He described using a gram of marijuana approximately once per month during his adolescent years. Mr. Murray added that he would "smoke a lot more since I've been in prison" but appeared to minimize his use when asked to quantify the amount of marijuana he has used while incarcerated. He indicated that, when not incarcerated, he mostly sold marijuana rather than using it himself. Mr. Murray denied developing a tolerance to marijuana or experiencing withdrawal symptoms upon stopping its use. The defendant has had past legal charges related to his marijuana use. He reported that his last use of marijuana was in May 2018 while he was at Allendale Correctional Institution prior to being transferred to GPH. The defendant told staff at DJJ and Beckman Mental Health Center that he used cannabis daily until July 2012. According to records from SCDC, the defendant has received a diagnosis of Cannabis Use Disorder. A review of Self Regional Hospital records indicated that the defendant endorsed use of cannabis on the day of the alleged incident. After reviewing available records and

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conducting a clinical interview, it is our opinion that he meets diagnostic criteria for Cannabis Use Disorder, in a controlled environment.

Mr. Murray reported that he first used "X or mollie" at age 15. He stated that he only used this drug a few times because it caused headaches. The defendant also believed that he has used K2/Spice (synthetic marijuana) in the past because "someone probably laced me before." He mentioned that he has abused opiates twice while in prison but stopped using them because it caused him to vomit.

The defendant stated that he first consumed alcohol as a young child. He reported that his mother put beer in his bottle to put him to sleep as an infant. Mr. Murray recalled that he first experienced alcohol intoxication when he was seven or eight years old. He stated that, as an adult, he consumed a cup of liquor mixed with Hawaiian punch if he "was going to a club." He denied consuming alcohol on a regular basis. Mr. Murray denied developing a tolerance to alcohol or experiencing withdrawal symptoms upon stopping its use. The defendant denied past legal charges or social problems related to his alcohol consumption. Based on the available information, a diagnosis of Alcohol Use Disorder is not currently indicated. Additional information may reveal sufficient diagnostic criteria for Alcohol Use Disorder.

Mr. Murray denied use of other illicit substances or other prescription medications.

**MEDICAL HISTORY:** The defendant reported that he has high blood pressure. He described having a surgical procedure at age 13 related to an infection caused by a spider bit. Mr. Murray denied allergies to medications; however, he reported that he is allergic to latex. He denied a history of seizures or loss of consciousness in the past. Medical records from SCDC have indicated that the defendant has a history of high blood pressure and Vitamin D deficiency.

On the day of the alleged incident, the defendant mentioned that he received a concussion and required stitches "because the officers jumped on me." He stated that he received medical treatment from Self Regional Hospital after the alleged incident. According to SCDC nursing staff, the defendant had an altered level of consciousness and vomited after the altercation with officers; however, head imaging completed at Self Regional Hospital did not reveal intracranial abnormalities or cranial fractures. He reported feeling "back to normal" once he was in the Self Regional Hospital emergency room.

**FAMILY HISTORY:** Mr. Murray reported that his father is "crazy"; he added that he is unsure of his father's mental health history. He stated that his father has had past psychiatric hospitalizations. The defendant stated that there is no family history of substance use or suicide attempts.

According to records from William S. Hall Psychiatric Institute, the defendant's father has a reported history of depression and learning difficulties. Beckman Mental Health Center

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records noted a history of the defendant's father being incarcerated as well stating that Mr. Murray's father had a history of substance use and schizophrenia.

**SOCIAL HISTORY:** Mr. Murray reported that he was born in Greenwood, SC. The defendant stated that he was raised by his mother. He acknowledged that he had a good childhood. Mr. Murray denied being the victim of physical or sexual abuse; however, he reported witnessing domestic violence between his parents. Mr. Murray stated that "My dad beat up my mom and I broke it up. I saw that a couple times. My life has not been the same since they split up when I was four or five."

Mr. Murray indicated that he started having behavior problems around the time of his parent's separation. He stated that his father has written to him while the defendant has been incarcerated; he added that his father is still involved in his life, even though his father has been "in and out of mental hospitals." Mr. Murray mentioned that he has two sisters. He reported that he remains close with his mother and sisters.

He acknowledged that his mother had complications during her pregnancy. The defendant reported that he believes he had surgery in the womb to repair "a hole in my heart" and stated that he was born six days after this operation. According to a previous competency to stand trial (CST) evaluation, Mr. Murray's mother denied pregnancy complications with defendant. Mr. Murray stated that he met his developmental milestones on time; however, he added that "it took me a minute to get potty trained." The defendant mentioned that he was "misunderstood" as a child; he clarified that he was wrongly accused of things because he had "ADHD and had too much energy."

The defendant reported a history of behavior problems in school since he was in kindergarten. He stated that he often had "outbursts" early in the morning at school. Mr. Murray indicated that he was suspended "a lot" for his behavior and was expelled once. The defendant stated that he repeated first grade because he "got into a scuffle." Mr. Murray reported that he started skipping school in the 8<sup>th</sup> grade. He stated that he dropped out of school in 8<sup>th</sup> grade but went back to school when he was in custody of the Department of Juvenile Justice (DJJ). The defendant indicated that he completed 10<sup>th</sup> grade. He stated that he dropped out of school because his "[Probation officer] said I was in too much trouble and wanted me to just get my GED." He reported that he made average grades.

A review of available records indicated that Mr. Murray was retained in second and seventh grades due to absences resulting from suspensions. His first suspension was in the first grade for disrupting class; his first expulsion was in third or fourth grade. The defendant informed SCDC staff that he attended special education classes for behavior problems but he attended regular classes prior to this placement. Psychological testing conducted while he was DJJ revealed that his Full Scale IQ was 100, which is in the average range.

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He reported a history of setting fire to grass and intentionally shooting a cat during his adolescence. The defendant reported that he ran away from home when he was 14 years old. According to a previous CST evaluation, the defendant's mother reported that she would not allow him to live at home because he stayed out at night and did not return home for weeks at a time.

Mr. Murray reported that his first job was at age 16, when he worked at Dairy Queen for a few months. He mentioned that this was his longest job. The defendant indicated that he also worked as a carpenter for a few weeks at an apartment. He stated that his last job was when he was 17 years old. He denied being fired from a job in the past.

Mr. Murray stated that his other source of income included selling marijuana intermittently between the ages of 10 and 17. He denied serving in the military. He stated that he did not have a driver's license because of a "Failure to Stop for Blue Light" charge on his record. The defendant reported receiving disability benefits for mental health when he was living in the community.

The defendant stated that he is single and has never been married. He denied having children. Mr. Murray reported that he has lived in Greenwood, SC throughout his life until he was incarcerated at SCDC. He mentioned that he has a female friend, with whom he corresponds with via mail since he has been incarcerated.

Mr. Murray stated that he went to DJJ two times: once at age 12 (for assault and battery and attempt to kill) and once around age 16 for third degree burglary.

DJJ records indicated that the defendant had first contact with the legal system in 2002; he was charged with three counts of Disturbing Schools and Assault and Battery on a School Employee. All of the above charges were dismissed. In 2003, he was charged with Disturbing School and placed on a behavior contract. In 2005, he was charged with Assault and Battery on a School Employee and Criminal Domestic Violence. These charges were dismissed; however, Mr. Murray was adjudicated delinquent for Simple Assault and Battery; he was also prosecuted for two counts of Assault and Battery of a High and Aggravated Nature (adjudicated delinquent for one count and the other one was nolle prossed); two counts of Public Disorderly Conduct (adjudicated delinquent for one count and the other count was nolle prossed); and Giving False Information to Law Enforcement and Simple Assault (adjudicated delinquent). The defendant was committed to DJJ in 2007 for an indeterminate sentence after a probation violation; he was given conditional release in 2009. Mr. Murray was given unconditional release from parole in 2010.

According to a previous CST evaluation, Mr. Murray's prior convictions, as an adult, include Burglary, third degree (x2), Public Disorderly Conduct and Violation of City Ordinance. He was charged with Armed Robbery, Petit Larceny, Simple Possession of Marijuana, No Moped Driver's License, Failure to Stop for Blue Light, Unlawful Carrying of Pistol,

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Possession of Pistol with Obliterated Serial Number and Assault and Battery by Mob 3<sup>rd</sup> degree in 2013. A review of SCDC records revealed that he has been incarcerated since 2012 for Threatening Life of Public Official; Assault and Battery 3<sup>rd</sup> degree; Failure to Stop for Officer; and Attempted Armed Robbery; his max out date is October 12, 2021. During his incarceration, he has received numerous disciplinary charges such as threatening to inflict harm on employee, assault and battery of an employee, and striking an employee.

**MENTAL STATUS EXAM:** Mr. Murray was alert and oriented to person, place, day, date, and time. He appeared well-groomed and wore an appropriate prison uniform. He made good eye contact. There were no abnormal movements noted. His speech was at a fast rate but it did not appear pressured. He was easily interrupted. He mumbled at times; however, he spoke up when asked to do so.

The defendant was able to name the current President and two past Presidents. He was not able to perform a calculation; he stated that 67 cents subtracted from \$1.00 was "37 cents." His fund of knowledge was judged to be in the average range. He was able to register three objects and he recalled all three of the objects with hints after a period of distraction. He was able to recall significant past personal information and we find no evidence of clinically significant long- or short-term memory impairment. His performance on a test of concentration was good. His interpretation of proverbs was fair. His judgment to a hypothetical situation was poor. If he were in a crowded theater and smelled smoke, he stated that he would "leave." He described his current mood as "good." He denied suicidal or homicidal ideation. He reported experiencing auditory hallucinations during the evaluation; however, he did not appear distracted or impaired in his ability to answer questions. There was no evidence of disturbed thought process or thought content. His thinking was logical and goal directed without looseness of associations or flight of ideas.

**DIAGNOSTIC FORMULATION:** Mr. Murray meets diagnostic criteria for Cannabis Use Disorder, in a controlled environment, as described in the section related to alcohol and substance abuse above.

Mr. Murray has engaged in several activities as a juvenile (e.g. fire setting, fighting, disrespecting authority figures) that met diagnostic criteria for Conduct Disorder. He has continued to engage in activities which are grounds for his arrest as an adult. He has failed to meet normal adult role responsibilities. The defendant has displayed a pattern of manipulation and deceitfulness. After reviewing available medical records and conducting a clinical interview, it is our opinion that he meets diagnostic criteria for Antisocial Personality Disorder.

The defendant has received a diagnosis of a psychotic disorder in the past and has been prescribed an antipsychotic currently. He has reported experiencing auditory and visual hallucinations since 2009. Mr. Murray has not displayed disorganized thought process, disorganized behaviors, or delusional beliefs outside of his substance use. His description of his hallucinations is atypical of individuals with severe and persistent mental illness. A

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diagnosis of a psychotic disorder appears to have been given based on his self-report of his symptoms. If his symptoms are genuine, his history of alcohol and illicit substance use likely account for experiencing such symptoms. For these reasons, no psychotic disorder is being offered at this time.

**CONCLUSION REGARDING CAPACITY TO STAND TRIAL:** The defendant was able to state his charges. He was aware of the alleged acts that resulted in the charges against him. Mr. Murray indicated that his charges are felonies and are serious; he reported that his charges carry a possible sentence of thirty years.

The defendant correctly identified his attorney and is aware how to contact his attorney. He reported that he last met with his attorney on July 19, 2018. Mr. Murray believed that his attorney is doing a good job; he reported that he trusts his attorney. The defendant mentioned that his attorney wanted him to take a plea bargain that was offered but he refused this plea bargain. The defendant reported that he would not keep secrets from his attorney. He acknowledged that his attorney could assist him better if he was honest with him.

Mr. Murray stated that he would take a plea bargain if the charge was reduced from Assault and Battery 1<sup>st</sup> degree to Assault and Battery 3<sup>rd</sup> degree. He stated that he would get time served for accepting a plea bargain that was previously offered to him. However, he stated that he does not want to plead guilty to Assault and Battery 1<sup>st</sup> degree as that charge is a felony. If his charge is reduced to Assault and Battery 3<sup>rd</sup> degree, he reported that charge would be a misdemeanor; he added that he could have that charge "expunged" from his record. Mr. Murray understood the concepts involved in a plea bargain.

Mr. Murray was able to correctly identify the role of his attorney, solicitor, and the judge. The defendant indicated that that role of the solicitor was to "give me a lot time"; he stated that the solicitor is on the side of "the State." Mr. Murray mentioned that the job of the judge was "weigh the court and give a fair decision." He acknowledged the impartiality of the judge.

The defendant was able to state the pleas of *guilty* and *not guilty* and he correctly defined both of them. The defendant added that one could waive his or her right to a jury trial. Mr. Murray was aware of the requirements of probation; he correctly named rules of probation and what could happen if one violates probation (i.e. return to jail).

The defendant was aware that the role of jury was to "give a verdict." He was aware that twelve people make up a jury. Mr. Murray was aware of the unanimous requirement for a jury verdict. He reported that a *guilty* verdict would result in someone "getting time" and a *not guilty* verdict would result in "the case being dismissed." The defendant was able to correctly describe the role of evidence and witnesses in a hypothetical situation presented to him. He denied that there was evidence against him in his case; however, he stated that there were multiple witnesses.

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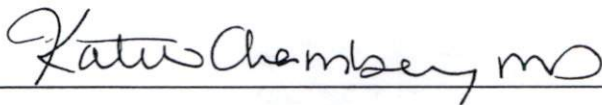
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Mr. Murray knew which individuals who would be present in the courtroom to include "the public defender, solicitor, victim, defendant, jury, court reporter." He required education on the charge of perjury and how this charge is different from a contempt of court charge. The defendant was aware that either of these charges could result in additional incarceration time.

Mr. Murray was able to correctly solve a hypothetical problem involving the courtroom. For example, if someone was lying about him in court, he would tell his attorney. He understands the importance of appropriate courtroom behavior and understands that if he were to be disruptive in court, he would get an additional charge. He understands the concept of testifying in court. He was aware about his right to not testify.

The defendant believed that he would get a fair trial. He stated that there could be witnesses against him who could testify. Mr. Murray added that "There are more people against me than for me but they ain't [sic] got no evidence."

Mr. Murray does not have a mental illness or intellectual disability that would interfere with his ability to understand the proceedings against him or assist his attorney in his own defense. He could benefit from re-education about his case, courtroom proceedings, and courtroom officials. He demonstrated the ability to cooperatively work with other people as evidenced during this evaluation. It is our opinion that he has a factual as well as rational understanding of the legal system and sufficient present ability to rationally assist his attorney in the preparation of a defense. The defendant understands the proceedings against him and he is able assist his attorney in his own defense if he chooses to do so. Therefore, it is our opinion that he has the capacity to stand trial pursuant to State vs. Blair, 275 S.C. 529, 273 S.E. 2d 536 (1981) and S. C. Code Ann. §44-23-410 (1976).



Katie M. Chambers, M.D.  
Fellow in Forensic Psychiatry  
University of South Carolina School of Medicine

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CRIMINAL RESPONSIBILITY/CAPACITY TO CONFORM EVALUATION  
FORENSIC EVALUATION SERVICE  
SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH (SCDMH)

NAME: Bryantavious Murray  
DATE OF BIRTH: April 7, 1994  
DATE OF REPORT: December 3, 2018  
PRESIDING: Katie M. Chambers, M.D.  
Fellow in Forensic Psychiatry  
University of South Carolina School of Medicine  
SECOND EXAMINER: Elizabeth Dawn Whetstone, LISW-CP  
OTHERS PRESENT: Marcus Bethurem, M.D.  
General Psychiatry Resident  
University of South Carolina School of Medicine

PSYCHIATRIC DIAGNOSES:

Antisocial Personality Disorder  
Cannabis Use Disorder, in a controlled environment

OPINION REGARDING CRIMINAL RESPONSIBILITY: Mr. Murray would have been criminally responsible on or about April 8, 2016.

OPINION REGARDING CAPACITY TO CONFORM: Mr. Murray would have had the capacity to conform his behavior to the requirements of the law on or about April 8, 2016.

DISPOSITION: Mr. Murray was returned to South Carolina Department of Corrections (SCDC) at the conclusion of this evaluation.

IDENTIFYING INFORMATION: Bryantavious Murray is a 24 year-old African American male who was seen at the Forensic Evaluation Service pursuant to a court order from the McCormick County Court of General Sessions. This court order requested an evaluation of his criminal responsibility for his actions on or about April 8, 2016, and if

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responsible, a determination of his capacity to conform his conduct to the requirements of the law pursuant to S.C. Code Ann §17-24-10 (1976). He is currently charged with Carrying or Concealing a Weapon by an Inmate, Attempted Murder, and Possession of a Weapon during a Violent Crime. According to the court order, this request was issued for the following reason: "Based upon Defense Counsel's Request, due to conversation with his client."

Prior to participating in the examination, Mr. Murray was warned regarding the limitations of confidentiality. He was informed that this evaluation was court ordered. He was informed that the evaluators were employed by the South Carolina Department of Mental Health and were not being paid by his attorney or the solicitor in his case. He was informed that after the evaluation was completed a report would be submitted to his attorney. He was also informed that a report may be submitted to the solicitor and the judge in his case. Finally, he was informed that the evaluators could be called to court to testify at a hearing related to his criminal responsibility and his capacity to conform his behavior. He was able to answer questions regarding this information correctly and he voluntarily agreed to participate in the evaluation.

#### SOURCES OF INFORMATION:

1. Court order from the McCormick County Court of General Sessions requesting the evaluation dated October 12, 2018.
2. McCormick County Court of General Sessions Indictments for Attempted Murder, Possession of a Weapon during a Violent Crime, and Carrying or Concealing A Weapon by Inmates dated September 7, 2016.
3. Arrest warrant 2016A35101000063 for Murder/Attempted Murder dated April 11, 2016.
4. Arrest warrant 2016A35101000062 for Prisoners/Carrying or concealing weapon by inmates dated April 11, 2016.
5. Arrest warrant 2016A35101000064 for Possession of a weapon during a violent crime dated April 11, 2016.
6. South Carolina Department of Corrections (SCDC) Arrest Warrant Affidavit Sheet for case number 32-2016-042 dated July 5, 2016.
7. SCDC Investigative Report for case number 32-2016-042 dated April 8, 2016.
8. SCDC Incident Report by Lt. James Thompkins dated April 8, 2016.
9. SCDC Incident Report by Mr. Joseph Stevens dated April 8, 2016.
10. SCDC Incident Report by Ms. Rhodesia Taylor dated April 8, 2016.
11. SCDC Incident Report by Lt. Cook dated April 8, 2016.
12. SCDC Incident Report by Lt. G. Rice dated April 8, 2016.
13. SCDC Incident Report by Vera E. Courson, RN dated April 8, 2016.
14. Voluntary Statement provided by Mr. Joseph Stevens dated April 8, 2016.
15. Voluntary Statement provided by Ms. Rhodesia Taylor dated April 8, 2016.
16. SCDC Evidence/Chain of Custody report dated April 8, 2016.
17. SCDC Offender Management System Inmate Offense History dated May 31, 2016.
18. SCDC Inmate Search Detail Report on Bryantavious Murray.

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19. William S. Hall Psychiatric Institute (Columbia, SC) medical records from January 17, 2002 to March 3, 2002.
20. Beckman Mental Health Center medical records (Greenwood, SC) from April 29, 2009 to December 11, 2013.
21. Greenwood County Detention Center Records from September 11, 2002 to March 23, 2013.
22. South Carolina Department of Mental Health (SCDMH) Episodes of Care Report (date unknown).
23. SCDC medical records from November 2017 to December 2018.
24. Competency to Stand Trial and Criminal Responsibility/Capacity to Conform evaluations performed by Brandi P. Justice, Psy.D. conducted on May 2, 2013 and May 31, 2013.
25. Department of Juvenile Justice (DJJ) records from June 14, 2007 to August 26, 2011.
26. Self Regional Healthcare (Greenwood, SC) medical records dated from April 8, 2016.
27. Telephone interview with nursing and mental health staff (Inmate's Counselor- Last name: Pelfrey) at South Carolina Department of Corrections conducted on December 3, 2018 for approximately ten minutes.
28. Clinical forensic interview with the defendant conducted on December 3, 2018 for approximately 1 hour and 30 minutes duration.

SCDMH Forensic Evaluation Service social work assessment could not be conducted due to a lack of contact information for a next of kin.

We reserve the right to alter our opinion should further information become available.

**CURRENT PSYCHIATRIC HISTORY:** Mr. Murray reported feeling "good" on the day of this evaluation. He denied having physical complaints. The defendant indicated that he has been in the F-1 dorm at Kirkland Correctional Institution (KCI) for the past three months. Mr. Murray stated that he was placed in the F-1 dorm because of his "long history of mental illness and been on a lot of drugs." The defendant reported that he was most recently at Allendale Correctional Institution prior to being hospitalized at Gilliam Psychiatric Hospital (GPH) for psychiatric treatment; he was sent to an intermediate level of care (which is located at F-1 dorm at KCI) after being discharged from GPH. He stated that he is currently taking the following medications: buspirone (Buspar<sup>®</sup>, an anti-anxiety medication); risperdone (Risperdal<sup>®</sup>, an antipsychotic); benztropine (Cogentin<sup>®</sup>, a medication used to alleviate side effects from antipsychotics); and metoprolol (an anti-hypertensive).

Mr. Murray reported that his sleep and appetite are "good." He mentioned that he spends his day "walking around the 'rock' and watching TV." The defendant stated that he is in a cell by himself. Mr. Murray denied having problems with detention center staff or peers. He indicated that he has declined visitors, stating "since I get out in two years, I don't want any visitors." The defendant mentioned that he writes letters to a childhood friend. He stated that he has good social support from his family.

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The defendant reported that he feels fidgety and "paranoid about being in a small room." He described his mood as "good"; he denied experiencing symptoms of depression. Mr. Murray denied current suicidal or homicidal ideation. He stated that he does experience "hearing voices all day, every day." The defendant reported that the voices are "like people talking to me." He mentioned that he does not know who the voice is and that there are different voices. Mr. Murray indicated that the voices "say everything." He also reported "seeing things shoot past me...they shoot through the vent and into the radio and I can hear them through the waves in the radio." He informed the evaluator that he copes with these hallucinations by ignoring them or turning his radio to a loud volume.

Recent medical records from SCDC revealed that the inmate has not displayed mood or symptoms for the past several months. He is prescribed Risperdal®. SCDC records noted that the inmate "does not appear delusional when discussing legal matters." Mr. Murray has reported to SCDC staff that he is "not mentally ill and did not need to take medications" at times. SCDC records also indicated that the defendant has a history of making suicidal statements for purposes of obtaining a desired outcome. For example, on September 9, 2018, Mr. Murray stated that he made suicidal statements because he "didn't want to be at [F-1 dorm] any longer." On September 26, 2018 he was noted to made suicidal statements; he reported "I'm hearing voices telling me to kill myself. I want to go to GPH." SCDC medical records document no evidence of the defendant displaying disorganized thought process, displaying disorganized behaviors, or possessing fixed false beliefs (i.e. delusions) when he reports experiencing auditory hallucinations. He has had no evidence of recent abnormal behavior.

A telephone interview with nursing and mental health staff at Kirkland Correctional Institute revealed that he is prescribed the following medications: buspirone; risperdone; benzotropine; metoprolol; and Vitamin D. He has remained compliant with his medication. He has not engaged in self-harm behaviors or disruptive behaviors. There is no evidence of symptoms of mania or psychosis. There was no evidence of disturbed thought process or thought content. His counselor at SCDC described his demeanor as "well."

**PAST PSYCHIATRIC HISTORY:** Mr. Murray reported that he has had behavior problems since he was four years old. He reported being diagnosed with ADHD (Attention Deficit/Hyperactivity Disorder) and prescribed a stimulant medication during childhood. SCDMH records indicated that this medication was not helpful for the defendant.

Mr. Murray stated that his first psychiatric hospitalization occurred when he was seven years old at William S. Hall. He indicated that he had another psychiatric hospitalization at the same facility one year later. Mr. Murray reported that he had outpatient mental health treatment at Beckman Mental Health Center as a child and again in 2012 when he was in the county jail.

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Mr. Murray denied experiencing symptoms of depression in the past. He mentioned that he started cutting himself between the ages of 22 to 24 because of being on "lockup status"; the defendant added that "They wouldn't let me off lockup and it was getting to me. So, I drew blood to make them work a little." He denied other past suicide attempts or self-harm behaviors.

He denied experiencing symptoms of mania outside of his illicit substance use. The defendant reported a history of aggression his "whole life." He indicated that he has experienced auditory and visual hallucinations for several years. Mr. Murray denied experiencing side effects to psychiatric medications currently or in the past.

A review of available medical records revealed the following:

SCDMH Episodes of Care report revealed that the Mr. Murray was first hospitalized at William S. Hall from January 17, 2002 to March 3, 2002. This report indicated that Mr. Murray intermittently sought outpatient mental health treatment at Beckman Mental Health Center from March 8, 2000 to December 11, 2013. He has received various diagnoses from SCDMH: Attention Deficit Hyperactivity Disorder (ADHD); Conduct Disorder, child onset type; Oppositional Defiant Disorder; Depression Not Otherwise Specified; Mood Disorder Not Otherwise Specified; and Psychosis Not Otherwise Specified.

At age seven, the defendant was hospitalized at William S. Hall Psychiatric Institute (WSHPI) in 2002 for "a danger to others." Mr. Murray had an altercation with a peer and then hit his principal, resulting in an admission to WSHPI. He had a history of hitting his principal several times. The defendant had a history of multiple fights as well as multiple suspensions from school. At the time of this admission to the hospital, he had been expelled from school. These records indicated that Mr. Murray had a history of aggression and behavior problems in school. During this hospitalization, the defendant's behavior was described as "difficult to control"; he kicked two staff members. Mr. Murray was described as "rude" and had "numerous altercations with peers." The defendant had to be placed on ward restrictions for a significant portion of this hospitalization due his behavior problems. There was no evidence of symptoms of mania or psychosis. There was no evidence of disturbed thought process or thought content. Mr. Murray denied experiencing auditory or visual hallucinations. He was prescribed medications to control his aggression and reduce his disruptive behaviors: paroxetine (Paxil<sup>®</sup>, an antidepressant); risperidone; and oxcarbazepine (Trileptal<sup>®</sup>, a mood stabilizer). Mr. Murray was diagnosed with "Oppositional Defiant Disorder, Depressive Disorder Not Otherwise Specified and ADHD by history". He was discharged home with a follow-up appointment at Beckman Mental Health Center on March 13, 2002. Due to SCDMH medical records retention policy, Beckman Mental Health Center medical records prior to 2009 were not available.

Mr. Murray was referred by the Department of Juvenile Justice (DJJ) to Beckman Mental Health Center around April 29, 2009; he was 14 years old. Mr. Murray reported experiencing auditory hallucinations and visual hallucinations of "little men". There was no

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evidence of disorganized thought process, disorganized behaviors, or delusional beliefs. These records indicated that he had charges as a juvenile for assault and battery of a high and aggravated nature resulting from choking a child until that child passed out. He has been suspended from alternative school. The defendant had a long history of disruptive behavior and behavior problems in school. Mr. Murray was placed in special education classes for behavioral problems; there was no evidence of intellectual disability (mental retardation). His mother reported that her primary concerns were his aggression and mood lability at that time. There was no evidence of the defendant displaying symptoms of mania or depression; however, he was prescribed oxcarbazepine at this appointment.

Mr. Murray was seen for follow-up appointments at Beckman Mental Health Center on June 3, 2009 and October 8, 2009. These records noted that his behavior problems and aggression improved with Trileptal®. There was no evidence of mania or psychosis. There was no report of disturbed thought content or process. During his last encounter with Beckman Mental Health Center on March 4, 2013, Mr. Murray had a chief complaint of "I need help so I won't see the little men or hear them talking anymore." He was not taking medication at this time. The defendant reported "hearing voices...all types...sometimes tell [me] [I'm] stupid; voices get stronger when [I] get angry." He was discharged from the mental health center due to being incarcerated. These records indicated that the defendant was prescribed haloperidol (Haldol®, an antipsychotic) and this medication would be continued when he was incarcerated at SCDC.

Records from DJJ revealed behavioral problems to include fighting, disorderly conduct, being disrespectful, and out of place at times. The defendant was also noted to be aggressive and threatening towards peers and staff while in the custody of DJJ. He received a Comprehensive Psychological Evaluation in 2007 and again in 2010. His intelligence was noted to be in the average range. Mr. Murray had no evidence of symptoms of mania, depression, or psychosis. There was no evidence of disturbed thought process or thought content. The defendant was recommended for substance use treatment for his regular alcohol and marijuana use. DJJ records reported that Mr. Murray was diagnosed with ADHD, Conduct Disorder, Cannabis Abuse, and Rule Out Alcohol Abuse.

Medical records from Greenwood County Detention Center reported that Mr. Murray described visual hallucinations which were atypical of genuine and persistent mental illness. For example, he stated that he saw "a midget in his cell telling him to jump in a pot of gold head first." However, he was prescribed an antipsychotic (Haldol®). Mr. Murray reported that this medication was "too strong" and refused to take it; several days later, he stated that this medication was not strong enough. An incident report at the detention center dated February 24, 2013 noted "Be careful when dealing with Murray he is trying to play crazy."

Disciplinary records from Greenwood County Detention Center revealed that the defendant had multiple incidents of threatening others and displaying aggressive behavior towards

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other inmates and staff. Mr. Murray indicated that the only way he could “get something done” was to make threats of self-harm. He was noted to have other behavioral problems to include taking others’ food, flooding his cell, indecent exposure, yelling for a non-emergency, being disrespectful, attempting to throw urine on officers, and failing to follow orders.

A review of South Carolina Department of Corrections (SCDC) revealed that the defendant has received various diagnoses prior to March 2018: Substance Induced Psychotic Disorder, Cannabis Use Disorder, Antisocial Personality Disorder, and Other Specified Schizophrenia Spectrum and Other Psychotic Disorder.

On March 14, 2018, Mr. Murray was diagnosed with Bipolar Disorder because he was observed to be talking fast, complained of auditory hallucinations, observed to have an elevated mood, and displayed tangential thought process. He was prescribed a mood stabilizer at that time. The defendant was noted to have “loose thought process” but was easily able to “get back on track” at times. Group therapy notes from March 14, 2018 did not document evidence of abnormal behavior. When he was seen by mental health on March 28, 2018, mental health staff opined that he was “likely paranoid because he wouldn’t make eye contact but did not appear overtly psychotic” at this time. After complaining of hallucinations and being described as “distracted and tangential”, Mr. Murray was prescribed risperidone (an antipsychotic).

The defendant appeared to worsen in May 2018 as evidenced by deterioration in his hygiene and disorganized thought process. He was described as “floridly psychotic” in SCDC records. However, during today’s evaluation, he reported that he heavily used cannabis in May 2018 prior to his admission to Gilliam Psychiatric Hospital (GPH) for psychiatric treatment in May 2018. He reported that his last use of marijuana was in May 2018 while he was in Allendale Correctional Institution prior to being transferred to GPH.

The defendant mentioned that, prior to being transferred to GPH, another inmate “told me to suck his private parts. So, I got me a knife and was going to cut his face. They put me on lock up and I smoked a lot of reefer to handle lockup.” When he arrived at GPH in May 2018, Mr. Murray displayed symptoms of mania and psychosis. However, his symptoms improved after several days when he did not have access to illicit substances.

**ALCOHOL AND DRUG USE HISTORY:** The defendant indicated that he first used marijuana at age 10. He described using a gram of marijuana approximately once per month during his adolescent years. Mr. Murray added that he would “smoke a lot more since I’ve been in prison” but appeared to minimize his use when asked to quantify the amount of marijuana he has used while incarcerated. He indicated that, when not incarcerated, he mostly sold marijuana rather than using it himself. Mr. Murray denied developing a tolerance to marijuana or experiencing withdrawal symptoms upon stopping its use. The defendant has had past legal charges related to his marijuana use. He reported that his last use of marijuana was in May 2018 while he was at Allendale

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Correctional Institution prior to being transferred to GPH. The defendant told staff at DJJ and Beckman Mental Health Center that he used cannabis daily until July 2012. According to records from SCDC, the defendant has received a diagnosis of Cannabis Use Disorder. A review of Self Regional Hospital records indicated that the defendant endorsed use of cannabis on the day of the alleged incident. After reviewing available records and conducting a clinical interview, it is our opinion that he meets diagnostic criteria for Cannabis Use Disorder, in a controlled environment.

Mr. Murray reported that he first used "X or mollie" at age 15. He stated that he only used this drug a few times because it caused headaches. The defendant also believed that he has used K2/Spice (synthetic marijuana) in the past because "someone probably laced me before." He mentioned that he has abused opiates twice while in prison but stopped using them because it caused him to vomit.

The defendant stated that he first consumed alcohol as a young child. He reported that his mother put beer in his bottle to put him to sleep as an infant. Mr. Murray recalled that he first experienced alcohol intoxication when he was seven or eight years old. He stated that, as an adult, he consumed a cup of liquor mixed with Hawaiian punch if he "was going to a club." He denied consuming alcohol on a regular basis. Mr. Murray denied developing a tolerance to alcohol or experiencing withdrawal symptoms upon stopping its use. The defendant denied past legal charges or social problems related to his alcohol consumption.

Based on the available information, a diagnosis of Alcohol Use Disorder is not currently indicated. Additional information may reveal sufficient diagnostic criteria for Alcohol Use Disorder.

Mr. Murray denied use of other illicit substances or other prescription medications.

**MEDICAL HISTORY:** The defendant reported that he has high blood pressure. He described having a surgical procedure at age 13 related to an infection caused by a spider bit. Mr. Murray denied allergies to medications; however, he reported that he is allergic to latex. He denied a history of seizures or loss of consciousness in the past. Medical records from SCDC have indicated that the defendant has a history of high blood pressure and Vitamin D deficiency.

On the day of the alleged incident, the defendant mentioned that he received a concussion and required stitches "because the officers jumped on me." He stated that he received medical treatment from Self Regional Hospital after the alleged incident. According to SCDC nursing staff, the defendant had an altered level of consciousness and vomited after the altercation with officers; however, head imaging completed at Self Regional Hospital did not reveal intracranial abnormalities or cranial fractures. He reported feeling "back to normal" once he was in the Self Regional Hospital emergency room.

**FAMILY HISTORY:** Mr. Murray reported that his father is "crazy"; he added that he is unsure of his father's mental health history. He stated that his father has had past

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psychiatric hospitalizations. The defendant stated that there is no family history of substance use or suicide attempts.

According to records from William S. Hall Psychiatric Institute, the defendant's father has a reported history of depression and learning difficulties. Beckman Mental Health Center records noted a history of the defendant's father being incarcerated as well stating that Mr. Murray's father had a history of substance use and schizophrenia.

**SOCIAL HISTORY:** Mr. Murray reported that he was born in Greenwood, SC. The defendant stated that he was raised by his mother. He acknowledged that he had a good childhood. Mr. Murray denied being the victim of physical or sexual abuse; however, he reported witnessing domestic violence between his parents. Mr. Murray stated that "My dad beat up my mom and I broke it up. I saw that a couple times. My life has not been the same since they split up when I was four or five."

Mr. Murray indicated that he started having behavior problems around the time of his parent's separation. He stated that his father has written to him while the defendant has been incarcerated; he added that his father is still involved in his life, even though his father has been "in and out of mental hospitals." Mr. Murray mentioned that he has two sisters. He reported that he remains close with his mother and sisters.

He acknowledged that his mother had complications during her pregnancy. The defendant reported that he believes he had surgery in the womb to repair "a hole in my heart" and stated that he was born six days after this operation. According to a previous competency to stand trial (CST) evaluation, Mr. Murray's mother denied pregnancy complications with defendant. Mr. Murray stated that he met his developmental milestones on time; however, he added that "it took me a minute to get potty trained." The defendant mentioned that he was "misunderstood" as a child; he clarified that he was wrongly accused of things because he had "ADHD and had too much energy."

The defendant reported a history of behavior problems in school since he was in kindergarten. He stated that he often had "outbursts" early in the morning at school. Mr. Murray indicated that he was suspended "a lot" for his behavior and was expelled once. The defendant stated that he repeated first grade because he "got into a scuffle." Mr. Murray reported that he started skipping school in the 8<sup>th</sup> grade. He stated that he dropped out of school in 8<sup>th</sup> grade but went back to school when he was in custody of the Department of Juvenile Justice (DJJ). The defendant indicated that he completed 10<sup>th</sup> grade. He stated that he dropped out of school because his "[Probation officer] said I was in too much trouble and wanted me to just get my GED." He reported that he made average grades.

A review of available records indicated that Mr. Murray was retained in second and seventh grades due to absences resulting from suspensions. His first suspension was in the first grade for disrupting class; his first expulsion was in third or fourth grade. The defendant

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informed SCDC staff that he attended special education classes for behavior problems but he attended regular classes prior to this placement. Psychological testing conducted while he was DJJ revealed that his Full Scale IQ was 100, which is in the average range.

He reported a history of setting fire to grass and intentionally shooting a cat during his adolescence. The defendant reported that he ran away from home when he was 14 years old. According to a previous CST evaluation, the defendant's mother reported that she would not allow him to live at home because he stayed out at night and did not return home for weeks at a time.

Mr. Murray reported that his first job was at age 16, when he worked at Dairy Queen for a few months. He mentioned that this was his longest job. The defendant indicated that he also worked as a carpenter for a few weeks at an apartment. He stated that his last job was when he was 17 years old. He denied being fired from a job in the past.

Mr. Murray stated that his other source of income included selling marijuana intermittently between the ages of 10 and 17. He denied serving in the military. He stated that he did not have a driver's license because of a "Failure to Stop for Blue Light" charge on his record. The defendant reported receiving disability benefits for mental health when he was living in the community.

The defendant stated that he is single and has never been married. He denied having children. Mr. Murray reported that he has lived in Greenwood, SC throughout his life until he was incarcerated at SCDC. He mentioned that he has a female friend, with whom he corresponds with via mail since he has been incarcerated.

Mr. Murray stated that he went to DJJ two times: once at age 12 (for assault and battery and attempt to kill) and once around age 16 for third degree burglary.

DJJ records indicated that the defendant had first contact with the legal system in 2002; he was charged with three counts of Disturbing Schools and Assault and Battery on a School Employee. All of the above charges were dismissed. In 2003, he was charged with Disturbing School and placed on a behavior contract. In 2005, he was charged with Assault and Battery on a School Employee and Criminal Domestic Violence. These charges were dismissed; however, Mr. Murray was adjudicated delinquent for Simple Assault and Battery; he was also prosecuted for two counts of Assault and Battery of a High and Aggravated Nature (adjudicated delinquent for one count and the other one was nolle prossed); two counts of Public Disorderly Conduct (adjudicated delinquent for one count and the other count was nolle prossed); and Giving False Information to Law Enforcement and Simple Assault (adjudicated delinquent). The defendant was committed to DJJ in 2007 for an indeterminate sentence after a probation violation; he was given conditional release in 2009. Mr. Murray was given unconditional release from parole in 2010.

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Murray, Bryantavious  
SCDMH# 202-4766

According to a previous CST evaluation, Mr. Murray's prior convictions, as an adult, include Burglary, third degree (x2), Public Disorderly Conduct and Violation of City Ordinance. He was charged with Armed Robbery, Petit Larceny, Simple Possession of Marijuana, No Moped Driver's License, Failure to Stop for Blue Light, Unlawful Carrying of Pistol, Possession of Pistol with Obliterated Serial Number and Assault and Battery by Mob 3<sup>rd</sup> degree in 2013. A review of SCDC records revealed that he has been incarcerated since 2012 for Threatening Life of Public Official; Assault and Battery 3<sup>rd</sup> degree; Failure to Stop for Officer; and Attempted Armed Robbery; his max out date is October 12, 2021. During his incarceration, he has received numerous disciplinary charges such as threatening to inflict harm on employee, assault and battery of an employee, and striking an employee.

**MENTAL STATUS EXAM:** Mr. Murray was alert and oriented to person, place, day, date, and time. He appeared well-groomed and wore an appropriate prison uniform. He made good eye contact. There were no abnormal movements noted. His speech was at a fast rate but it did not appear pressured. He was easily interrupted. He mumbled at times; however, he spoke up when asked to do so.

The defendant was able to name the current President and two past Presidents. He was not able to perform a calculation; he stated that 67 cents subtracted from \$1.00 was "37 cents." His fund of knowledge was judged to be in the average range. He was able to register three objects and he recalled all three of the objects with hints after a period of distraction. He was able to recall significant past personal information and we find no evidence of clinically significant long- or short-term memory impairment. His performance on a test of concentration was good. His interpretation of proverbs was fair. His judgment to a hypothetical situation was poor. If he were in a crowded theater and smelled smoke, he stated that he would "leave." He described his current mood as "good." He denied suicidal or homicidal ideation. He reported experiencing auditory hallucinations during the evaluation; however, he did not appear distracted or impaired in his ability to answer questions. There was no evidence of disturbed thought process or thought content. His thinking was logical and goal directed without looseness of associations or flight of ideas.

**DIAGNOSTIC FORMULATION:** Mr. Murray meets diagnostic criteria for Cannabis Use Disorder, in a controlled environment, as described in the section related to alcohol and substance abuse above.

Mr. Murray has engaged in several activities as a juvenile (e.g. fire setting, fighting, disrespecting authority figures) that met diagnostic criteria for Conduct Disorder. He has continued to engage in activities which are grounds for his arrest as an adult. He has failed to meet normal adult role responsibilities. The defendant has displayed a pattern of manipulation and deceitfulness. After reviewing available medical records and conducting a clinical interview, it is our opinion that he meets diagnostic criteria for Antisocial Personality Disorder.

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Murray, Bryantavious  
SCDMH# 202-4766

The defendant has received a diagnosis of a psychotic disorder in the past and has been prescribed an antipsychotic currently. He has reported experiencing auditory and visual hallucinations since 2009. Mr. Murray has not displayed disorganized thought process, disorganized behaviors, or delusional beliefs outside of his substance use. His description of his hallucinations is atypical of individuals with severe and persistent mental illness. A diagnosis of a psychotic disorder appears to have been given based on his self-report of his symptoms. If his symptoms are genuine, his history of alcohol and illicit substance use likely account for experiencing such symptoms. For these reasons, no psychotic disorder is being offered at this time.

#### DEFENDANT'S PARAPHRASED ACCOUNT OF THE ALLEGED INCIDENTS:

The defendant stated that, on the morning of the alleged incident, he was not out of place because he had received permission to go to the dental clinic. He reported that he was walking on a sidewalk between "F-2" and "F-4" housing units when he saw officers running towards him. He mentioned that he "snatched a burgundy hair pick out of my waist band because I didn't want contraband on my person"; he added that he then threw the hair pick towards the top of the building. The defendant denied assaulting Mr. Joseph Stevens. Mr. Murray stated that the alleged incident between he and Mr. Stevens did not occur. He reported that he sustained a concussion from the "ambush of the officers" and required stitched from this injury. The defendant stated that he was taken to Self Regional Hospital for treatment shortly after "the ambush." Mr. Murray denied using alcohol or illicit substances on the day of the alleged incident.

**INFORMATION FROM AVAILABLE MEDICAL RECORDS:** A review of SCDC and Self Regional Hospital medical records from the day of the alleged incident revealed that Mr. Murray was seen by medical staff after the alleged incident. The SCDC nurse reported that he had a one inch laceration behind his left ear, several small lacerations above his right brow with swelling noted, and swelling to his left cheek. Mr. Murray was alert and oriented. He started vomiting and had a decreased level of consciousness; however, the nurse reported that Mr. Murray remained easily aroused. She also commented that the defendant had an odor of alcohol coming from him.

When he was at the Self Regional Hospital emergency room (ER), Mr. Murray informed ER staff that he used marijuana and consumed alcohol on the day of the alleged incident. A urine drug screen was not performed in the ER for unclear reason. There was no evidence of the defendant displaying symptoms of mania or psychosis around the time of the alleged incident or in the month prior to the alleged incident according to Self Regional Hospital and SCDC medical records. There was no evidence of disturbed thought process or thought content.

**CONCLUSION REGARDING CRIMINAL RESPONSIBILITY:** It is our opinion that Mr. Murray was not suffering from symptoms of a mental illness that would have specifically impaired his ability to distinguish legal or moral right from legal or moral wrong or to recognize the particular act charged as legally or morally wrong.

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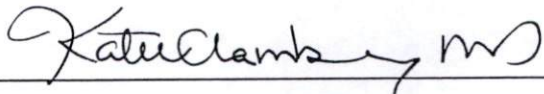
Murray, Bryantavious  
SCDMH# 202-4766

If the defendant is proven to be the perpetrator, there are behaviors that he displayed around the time of the alleged incidents that are consistent with knowledge of wrongfulness:

- Having a rational and reality-based motive for assaulting Mr. Stevens, i.e. he was being confronted about being out of place
- Leaving the scene after the alleged incident (an effort to avoid apprehension)
- Throwing away an object that was assumed to be the weapon in the alleged incident (disposal of evidence)

Therefore it is our opinion that he would have been criminally responsible pursuant to S.C. Code Ann. § 17-24-10 (1976).

**CONCLUSION REGARDING CAPACITY TO CONFORM:** We find no evidence that Mr. Murray was suffering from a compulsion, irresistible impulse, delusion, or other symptoms of a mental illness which would have substantially impaired his ability to conform his conduct to the requirements of the law.



Katie M. Chambers, M.D.  
Fellow in Forensic Psychiatry  
University of South Carolina School of Medicine

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Murray, Bryantavious  
SCDMH# 202-4766

Motion to or exhibits  
to show Rule (5) No evidence  
pages include charge with no  
evidence and recommendation by the State  
for mental incompetency, one dismissal  
of charges for 4-8-2016, was a non violent  
INDICTMENT for officers in Diligent,  
and neglect in case.

STATE OF SOUTH CAROLINA )	MCCORMICK GENERAL SESSION'S COURT
)	
COUNTY OF MCCORMICK )	ELEVENTH JUDICIAL CIRCUIT
)	
STATE OF SOUTH CAROLINA, )	<b>RULE 5 AND <i>Brady</i> MOTION</b>
)	<b>FOR DISCOVERY AND</b>
)	<b>INSPECTION</b>
)	
vs. )	
BRYANTAVIO MURRY )	Warrant # 2016A3510100062, 63, 64
)	
DEFENDANT )	
_____ )	

FILED  
 RAVENHOLLYN D. CHILDS  
 CLERK OF DISTRICT COURT  
 MCCORMICK COUNTY, SOUTH CAROLINA  
 2016 SEP - 8 P 2:05 PM

NOW COMES the Defendant, by and through the undersigned counsel of record, pursuant to Rule 5 of South Carolina Rules of Criminal Procedure and *Brady v. Maryland*, who moves the prosecution to permit the defendant to inspect and copy or photograph, within **thirty days** of the service of this Motion, including, but not limited to, the following, with the express provision that the duty of disclosure be continuing one in the event that any such materials come into existence or become available after the initial disclosures.

The defendant further moves that upon failure of the prosecution to so comply, that the Presiding judge issue an Order prohibiting the prosecution from introducing at trial evidence not disclosed, and if the foregoing is denied, an Order permitting the discovery and inspection requested, or a continuance of the trial, or such Order as the Court in its discretion deems just under the circumstances.

Defendant asserts that any items requested is material to the preparation other defense in this case. As grounds therefore, the undersigned would show as follows:

1. Under the United States Supreme Court decision in *Brady v. Maryland*, 373 U.S. 83 S. Ct. 1194 (1963), the solicitor has an obligation to produce all *Brady* material for the defendant well in advance of the scheduled trial date.

2. Defendant claims under *Brady, supra, Kyles v. Whitley*, 514 U.S. \_\_\_, 131 L. Ed. 490, 15 S. Ct. \_\_\_ (1995), and its progeny, as well as pursuant to the language and spirit of *Giglio v. United States*, 405 U.S. 150, 92 S. Ct. 763 (1972); *United States v. Tashman*, 478 F. 2d 129 (5<sup>th</sup> Cir. 1973); and *Napue v. Illinois*, 360 U.S. 264, 79 S. Ct. 1173 (1959); *Alcorta v. Texas*, 355 U.S. 28, 78 S. Ct. 103 (1957)(1975); *Mooney v. Holohan*, 294 U.S. 103, 55 S. Ct. 340, reh.den. *Ex parte Mooney*, 294 U.S. 732, 55 S. Ct. 571 (1935); and *Moore v. Illinois*, 408 U.S. 786, 92 S.Ct. 2562 (1972), reh. den. 409 U.S. 897, 93 S. Ct. 87 (1972); and that he/she is entitled to any and all records, memoranda and documents, as well as a statement of the Circuit Solicitor and all appropriate state, federal and local law enforcement agencies as to:

A. All statements by the Defendant, whether oral or written; if written whether signed or unsigned.

B. All handwritten notes made by police or other investigating officers of their interview or conversation with the Defendant or any other witnesses.

C. Any oral, written, or recorded statements made by any person to the solicitor's office, Grand Jury or any law enforcement agency in connection with this case.

D. A copy of all tape recordings, audio or video, made by a Defendant, witness or any other person in connection with this case. If these tape recordings have been transcribed, then a copy of the transcribed conversation is also requested.

E. Any and all investigation reports, information or material which tends to establish the Defendant's innocence, to mitigate punishment, or to impeach, discredit, or contradict the testimony of any witness whom the State will or may call at trial. *Giles v. Maryland*, 386 U.S. 66, 87 S. Ct. 793 (1967); *Napue v. Illinois*, 360 U.S. 264, 79 S. Ct. 1173 (1959); *Giglio v. United States*, 405 U.S. 150, 92 S. Ct. 763 (1972).

F. The names and addresses of all witnesses interviewed by the solicitor's office or any other law enforcement agency who might establish the Defendant's innocence, mitigate punishment, or impeach, discredit, or contradict the testimony of any witness of the State, whether or not the witness may testify at trial.

G. Any and all photographs taken of the Defendant on any portion of his body.

H. Any and all photographs taken at the scene of the alleged crime and/of the alleged victim or prosecuting witnesses.

I. Any photographs that have been exhibited to any person for the purpose of establishing the identity of the perpetrator of the crime charge and the name and a current address of the person or persons to whom the photographs were shown.

J. Any scientific or medical report which tends to establish the Defendant's innocence, to mitigate punishment or to impeach, discredit, or contradict the testimony of any witness whom the State will or may call at trial. *Ashley v. Texas*, 319 F2d 80 (5<sup>th</sup> Cir.), cert. den. 375 U.S. 931, 84 S.Ct. 331 (1963). This request shall include any reports by or to the State Law Enforcement Division (SLED) criminalistic laboratory, Federal Bureau of Investigation laboratories, County Sheriff's Department laboratory or any other law enforcement laboratory concerning an examination made by said laboratories and/or personnel thereof of any physical, photographic, oral or written evidence concerning the investigation of this case.

K. All reports from the State Law Enforcement Division (SLED), Sheriff's Department, or any other law enforcement agency, including the Federal Bureau of Investigation, concerning fingerprints checked in connection with this case.

L. All records of arrests or criminal convictions of the Defendant or any co-defendant and all State's witnesses in relation to this case. *Giglio v. United States*, 405 U.S. 150, 92 S. Ct. 7563 (1972).

M. All "inconsistent" statements made by a particular witness or between witnesses, whether written or oral, that are known to the solicitor's office or any other law enforcement agency.

N. Any statement or admission by any witness for or on behalf of the State with respect to the witness's memory or loss thereof.

O. Whether any witness called before the Grand Jury who has or will give testimony to any investigative agency or at trial has ever been psychiatrically hospitalized or undergone psychiatric treatment, examination, mental status examination or care, and if so, a list of names and addresses of the psychiatrists, hospitals and copies of any and all relevant records and reports regarding such examination, treatment, or care.

P. All notes or memoranda prepared by psychiatrists or other medical or mental health examiners regarding their conversations with the Defendant.

Q. Any and all plea bargains, promises, rewards, reductions, dismissals,

agreements not to bring criminal charges, or any other inducement made to any witness herein, whether or not such witness has testified before any State or Federal Grand Jury, or other investigative agency, and regardless of whether such witness will testify at trial.

R. Any offers or grants of immunity to any witness regarding loss of property, fine, forfeiture, prosecution or punishment in this case or any other case, related or otherwise.

S. Any and all memoranda, reports and correspondence to and from the various law enforcement agencies of the United States and all state, county, municipal and local enforcement agencies regarding the investigation herein.

T. Any and all physical or tangible items in the possession, custody or control of, the solicitor's office, and/or any state, federal or local law enforcement agency.

3. Defendant contends that this court should specifically direct the State in the spirit of fairness and equity, to seek and produce for Defendant the documents, letters, records and other items sought, irrespective of the State's determination of whether a witness's statement or a particular letter or exhibit can "help" the Defendant. The Defendant and his/her attorney, not the solicitor, should be the judge of his/her defense and the documents relevant thereto and necessary in support of the same.

4. To the extent the Defendant is specifically required to demonstrate the materiality of the requested information, the Defendant submits that this requirement is satisfied in this motion. *United States v. Agurs*, 427 U.S. 97, 96 S. Ct. 2392 (1976).

5. Recognizing that *Brady v. Maryland*, *supra* and other authorities cited herein require that information favorable to the Defendant be made available, and further recognizing that a genuine disagreement may arise as to whether or not a particular item of evidence is favorable, it will be requested that the court provide for an in camera inspection of the items sought to be discovered should the state feel such items are not favorable to the Defendant. By permitting the court to examine the items requested, the legitimate interests of the State will be protected in that no disclosure in excess of *Brady*, et al. will occur. Further, it will be requested of the court that said Order will be a continuing one, and if, prior to or during trial, the state discovers additional evidence or material requested, the state is hereby requested promptly to notify counsel for the Defendant of the existence of the additional evidence or material.

WHEREFORE, the undersigned prays for such Order requiring production of the above listed materials and for that which is just and proper.

**BENNETT CASTO**

Attorney for the Plaintiff

By: 

Bennett Casto

PO Box 1852

McCormick, SC 29835

Phone: (864) 465-9555

Fax: (864) 465-9554

McCormick, SC

July 30, 2016

DOCKET NO. 2016-GS-35- 146

**The State of South Carolina**  
County of MCCORMICK  
COURT OF GENERAL SESSIONS

SEPTEMBER TERM 2016

**THE STATE**  
vs.

BRYANTAVIO KENTRELL MURRY

*Nol Pros - pled to other charges.*

*Robert M. 1/8/19*

*Robert McNeir*

WITNESSES

SCDC

SCOTT

ARREST WARRANT NUMBER

2016A3510100062

ACTION OF GRAND JURY

*True Bill*

*Cheryl Daniel*

Foreperson of Grand Jury

Date: **SEP 07 2016**

CDR#0441

VERDICT

**Indictment for**

CARRYING OR CONCEALING A  
WEAPON BY INMATES

Foreperson of Petit Jury

Date:

**DONALD V. MYERS, SOLICITOR**

STATE OF SOUTH CAROLINA

IN THE COURT OF GENERAL SESSIONS

COUNTY OF McCormick
STATE VS.
Bryantavio Kentrell Murry
AKA:
Race: B Sex: M Age: 22
DOB: 04-07-1994 SS#: 251-93-6372
Address: 386 Redemption Way
City, State, Zip: McCormick, SC 29899
DL#: SID#:

INDICTMENT/CASE#: 2016GS3500144
A/W#: 2016A3510100063
Date of Offense: 4/8/2016
S.C. Code §: 16-03-0029
CDR Code #: 3410

SENTENCE SHEET

\*CDL Yes No CMV Yes No Hazmat Yes No
In disposition of the said indictment comes now the Defendant who was CONVICTED OF or PLEADS TO: Assault & Battery First Degree

in violation of § 16-3-600(c)(1) of the S.C. Code of Laws, bearing CDR Code # 3412
NON-VIOLENT VIOLENT SERIOUS MOST SERIOUS
Mandatory GPS §17-25-45 (CSC w/minor 1st or Lewd Act)

The charge is: As Indicted, Lesser Included Offense, Defendant Waives Presentment to Grand Jury.
The plea is: Without Negotiations or Recommendation, Negotiated Sentence, Recommendation by the State.

ATTEST: [Signature] Solicitor, [Signature] SC Bar# 72860 Defendant, [Signature] Attorney for Defendant, [Signature] SC Bar# 76708

WHEREFORE, the Defendant is committed to the State Department of Corrections, County Detention Center,
for a determinate term of 3 days/months/years or under the Youthful Offender Act not to exceed years
and/or to pay a fine of \$; provided that upon the service of days/months/years and/or payment
of \$; plus costs and assessments as applicable\*; the balance is suspended with probation for

months/years and subject to South Carolina Department of Probation, Parole and Pardon Services standard conditions of probation, which are incorporated by reference.

CONCURRENT or CONSECUTIVE to sentence on: Concurrent Sentence
The Defendant is to be given credit for time served pursuant to S.C. Code §24-13-40 to be calculated and applied by the State Department of Corrections.
The Defendant is to be placed on the Central Registry of Child Abuse and Neglect pursuant to S.C. Code §17-25-135.

Pursuant to 18 U.S.C Section 922, it is unlawful for a person convicted of a violation of Section 16-25-20 or 16-25-65 (Domestic Violence) to ship, transport, possess, or receive a firearm or ammunition.

SPECIAL CONDITIONS:

RESTITUTION: Deferred Def. Waives Hearing Ordered
Total: \$ plus 20% fee: \$
Payment Terms:
Set by SCDPPPS

Recipient: Public Defender Fee 40.00

Table with 3 columns: Description, Amount, Total. Includes items like 14-1-206 (Assessments 107.5%), 14-1-211(A)(1) (Conv. Surcharge) \$100, 14-1-211(A)(2) (DUI Surcharge) \$100, 56-5-2995 (DUI Assessment) \$12, 56-1-286 (DUI Breath Test) \$25, Proviso 61.6 (Public Def/Probation) \$500, 14-1-212 (Law Enforce. Funding) \$25, 14-1-213 (Drug Court Surcharge) \$150, 50-21-114 (BUI Breath Test Fee) \$50, 56-5-2942(J) (Vehicle Assessment) \$40/ea, 3% to County (if paid in installments) \$3.75.

TOTAL \$ 168.75

Clerk of Court/ Deputy Clerk: Dawn Miller
Court Reporter: Stacy Johnson
SCCA/217 (07/2016)

PTUP
days/hours Public Service Employment
Obtain GED
Attend Voc. Rehab. or Job Corp.
May serve W/E beginning
Substance Abuse Counseling
Random Drug/Alcohol testing
Fine may be pd. in equal, consecutive weekly/monthly pmts. of \$ beginning
\$ paid to Public Defender Fund
Other:

Appointed PD or appointed other counsel, §Proviso 61.6 requires \$500 be paid to Clerk during probation and shall be collected before any other fees.
Presiding Judge: [Signature]
Judge Code:
Sentence Date: 1-8-19

1. prof. that CASE DATE: 3/16/2018  
WAS NOT DATED IN ATTACHMENT,

2.) PRELIMINARY STATEMENT TO SHOW  
CASE SHOULD NOT HAVE BEEN TREATED  
AS A REGULAR CASE IT SHOULD HAVE  
BEEN FILED AND OR PAUSED FOR TRIAL

See: CASE: for ~~CA 101~~ for new  
TRIAL: Wertzig v. Halliburton  
Energy Services, INC

ON Rule 60(b)

"Potential for Reinstatement  
of Voluntary Dismissal"

New Case

STATE OF SOUTH CAROLINA

CASE NO. 2018CP3574

COUNTY OF MCCORMICK

IN THE COURT OF COMMON PLEAS

2018 08 28 F 2-117

STATE OF SOUTH CAROLINA

Bryantavious Murray  
PLAINTIFF(S)

SCDC  
DEFENDANT(S)

CHECK ALL THAT APPLY:

RE: INMATE FILING OF CIVIL SUITS:

( ) THE PLAINTIFF, AN INMATE WITH THE SOUTH CAROLINA DEPARTMENT OF CORRECTIONS, (HAS/HAS NOT) COMPLIED WITH SECTION 24-27-100.

( ) THE CLERK OF COURT IS HEREBY ORDERED (TO FILE/NOT TO FILE) THE WITHIN ACTION.

THE SCDC SHALL DEDUCT THE FILING FEE FROM THE PRISONER'S TRUST ACCOUNT PURSUANT TO SECTION 24-27-100 AND SHALL FORWARD THE FUNDS TO THE CLERK OF COURT FOR MCCORMICK COUNTY, SOUTH CAROLINA. *This includes service fees.*

Dated at McCormick, SC, this 28<sup>th</sup> date of August, 2018

Al Bruce Lee

Chief Administrative Judge

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Attorney(s) for Plaintiff

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Attorney(s) for Defendant

Emailed +  
mailed to  
Judge Utilator

Bobby Adams  
Clerk of Court  
Jopelyn

3/10/18

## PRELIMINARY STATEMENT

THIS ACTION IS BROUGHT AGAINST THE SCOC ALLEGING GROSS NEGLIGENCE AND NEGLIGENCE OF A VULNERABLE ADULT WHILE SCOC OFFICIALS AND EMPLOYEES (1) FAILED TO PROVIDE ME PROTECTIVE CUSTODY AFTER I INFORMED MENTAL HEALTH MS. BRIDGES 6/22/2016, AFTER A DOCUMENTATION OF (1): ORIGINAL COPY OF AN OFFICERS INCIDENT REPORT THAT WAS FILED IN ON 6/22/2016. AT PERRY CORRECTIONAL INSTITUTION BY MENTAL HEALTH MS. BRIDGES THAT I FEARED FOR MY LIFE AND SAFETY AFTER BEING THREATENED, AND BEATEN BRUTALLY THREE PHYSICALLY PATTERED BY SCOC EMPLOYEES. (2) THEY USED UNNECESSARY MK-4 NOTED AS OTHER TARP CLAS. TO INCLUDE UNNECESSARY AMOUNT OF EXCESSIVE PHYSICAL FORCE AGAINST ME WHILE I WAS SECURED IN RESTRAINTS (3) THEY FAILED TO PROVIDE ME ADEQUATELY BUT INTENTIONALLY DELAYED ME DELIBERATE MEDICAL ATTENTION AFTER HAVING USED MK-4 PEPPER SPRAY AND OTHER PHYSICAL FORCE AGAINST ME, (4) THEY FAILED TO PROVIDE SAFETY MEASURES TO PREVENT UNAUTHORIZED TOUCHMENTS TO INMATE WHICH EXTENDED TO AN EXCESSIVE FORCE HISTORY WHICH IS NOT RULED FAVORABLE BUT WAS USED IN A MALICIOUSLY INTENT ACT WHICH ONE (1) INMATE WAS RESULTED TO UNLAWFUL INJURIES TO SECURE HRS GROSS NEGLIGENCE CLAIMS. (5) THEY UNNECESSARILY DESTROYED MY AUTHORIZED PERSONAL PROPERTY THREE PHYSICALLY INSTITUTION THREE THREE INSTITUTIONS (5) TO INCLUDE A WHEELCHAIR BOARD GAME SET. (6) THEY FAILED TO COMPLY WITH MEDICAL INSTRUCTIONS REGARDING MY HEALTH - AFTER CARE WHEN I WAS RELEASED FROM THE HOSPITAL AND. (7) THEY FAILED TO PROVIDE ME PROMPT MENTAL HEALTH ASSESSMENTS, TREATMENT AND COUNSELING TO INCLUDE RELEASE FROM RYU FOLLOWING THE TRAUMATIC TOWNS THAT I SUFFERED DURING THE TIME OF THIS USE OF FORCE... TO INCLUDE RETALIATION, AND HUMILIATION THROUGHOUT THE TIME OF THIS INCIDENT AND AFTER... WHICH MEET THE STANDARDS FOR A GROSS NEGLIGENCE CLAIMS... LAWSUIT... TO FILE.

**LEGAL**

Bryantvioud K Murray  
304 Whitehall ROAD  
Greenwood, S.C. 29646.



Denesha A. A. A.  
J.C. Appeals Court  
1220 Senate Street  
Columbia S.C. 29201.