

LEGAL MAIL
MAIL ROOM

COUNTY OF CLARENCE
STATE VS
SC ANDREW BLACKMOR

INDICTMENT/CASE#: 2013-65-14-0070

A/W#: 2013A14201M0014

DATE OF OFFENSE 1/25/13

SC CODE § 16-11-380

CDR CODE#: 0257

RECEIVED

OCT 16 2014

SC Court of Appeals

PLEASE SEND COPY OF RECEIPT
TO CONFIRM THAT THE COURT OF
APPEALS HAS RECEIVED THIS BRIEF
TO
ANDREW BLACKMOR #357777 F3-168A
MCCORMICK CORRECTIONAL INSTITUTION
386 REDEMPTION WAY
MCCORMICK SC 29899

LEGAL MAIL
MAIL ROOM

= ANDREW BLACKMON BEING

OF SOUND MIND AND WITHOUT ANY
THREATS COERCION OR ENCOURAGEMENT WRITE
AND ACKNOWLEDGE THE FOLLOWING
STATEMENT TO BE TRUE TO THE BEST OF MY
KNOWLEDGE

RECEIVED

OCT 16 2014

SC Court of Appeals

Andrew Blackmon
ANDREW BLACKMON

SWORN AND SUBSCRIBED

TO BEFORE ME ON THIS 03 DAY OF
OCTOBER 2014

Franklin
NOTARY PUBLIC

MY COMMISSION EXP
12-16-2019

RECEIVED

OCT 3 6 2014

SC Court of Appeals

10-11-14

Pg 1.

THIS BRIEF ADDRESSED TO THE HONORABLE COURT OF APPEALS
I ANDREW BLACKMON CONTEND THAT I DID NOT VOLUNTARY AND KNOWINGLY ENTER THIS GUILTY PLEA. ALSO I WAS UNABLE TO UNDERSTAND THE NATURE AND CONSEQUENCES OF THE PROCEEDINGS AGAINST ME AND COULD NOT PROPERLY ASSIST IN MY DEFENSE. ON PG 4 LINE 8 OF THE TRANSCRIPT OF PLEA HEARING THE JUDGE ASK ME IF I WAS AWARE OF ANY PHYSICAL, NERVOUS OR MENTAL CONDITION THAT WOULD KEEP YOU FROM UNDERSTANDING WHAT WE'RE DOING TODAY. I ADMITTED TO THE JUDGE IM NOT QUITE SURE I GOT MENTAL ILLNESSES BUT THEY HAVENT DIAGNOSED ME WITH MY MENTAL ILLNESSES IN THIS STATE BUT I HAVE BEEN DIAGNOSED IN THE PAST. THE JUDGE THEN ASK ME BUT YOU'VE HAD TEST DONE IN THIS STATE REFERRING TO THE MAY 7TH 2013 M'NAUGHTEN COMPETENCY TEST WHICH I HAVE SUBMITTED TO THE HONORABLE COURT OF APPEALS BECAUSE I HAVE PROVEN WITH EVIDENCE THAT THE MAY 7TH EVALUATION IS INADEQUATE TO SAY THE LEAST. ALSO THE JUDGE ASKED ME SO YOU'RE NOT CLAIMING TO BE INSANE OR NOT KNOWING WHATS GOING ON TODAY.

10-11-14

PG 2.

AND AT THAT POINT THE JUDGE IS QUESTIONING my competency AND THEREFORE HAS A BONA FIDE ~~DOUBT~~ DOUBT ABOUT my competency. BECAUSE IM NOT A MENTAL HEALTH PROFESSIONAL I FEEL THAT THE COURT SHOULD HAVE HELD A COMPETENCY HEARING TO DETERMINE my competency TO TAKE THE PLEA. AND THEREFORE RESOLVE ANY DOUBTS THAT THE COURT HAD AT THAT TIME BEFORE ACCEPTING A PLEA FROM SOMEONE WHO MAY VERY WELL BE INCOMPETENT TO TAKE PLEA. ON PG 5 LINE 4 OF THE PLEA HEARING TRANSCRIPT THE JUDGE ASKED ME IS WHAT'S STATED IN THIS INDICTMENT THE TRUTH. AND I RESPONDED IN TRUTH AND TOLD HIM UNDER MENTAL ILLNESS AT THAT THE JUDGE STATED AND WE'RE NOT GOING INTO THAT THE JUDGE REFUSE TO HEAR TESTIMONY ABOUT my MENTAL ILLNESS HISTORY AND LET ME EXPLAIN TO THE COURT THE FACT THAT I WAS ONLY BEING CHARGED WITH THIS CRIME WAS BECAUSE OF A DIRECT RESULT OF MENTAL DISEASE OR DEFECT AND THAT IM NOT GUILTY NOR AM I LEGALLY RESPONSIBLE FOR THE CRIME IM BEING CHARGED WITH. THE JUDGE THEN ASKED ME IF I WANTED TO PLEA GUILTY AND IS WHATS STATED IN THIS INDICTMENT THE TRUTH. I TOLD THE JUDGE THE TRUTH AND SAID NO SIR! I ALSO STATED TO THE COURT BUT ITS NOT TRUE!!

10-11-14

PG3

I would LIKE DIRECT THE HONORABLE COURT OF APPEALS ATTENTION TO Pg 9 LINE 40 12A 130140 & 15A THE COURT ASKED ME DO I UNDERSTAND THAT WHEN YOU PLEAD GUILTY YOU WAIVE CERTAIN CONSTITUTIONAL RIGHTS. AND I SAID YES SIR. THE JUDGE ASKED ME THE SAME QUESTION AND I HAD TO ADMIT I DONT UNDERSTAND THE FACT REMAINS I TRULY DID NOT UNDERSTAND ANY OF THE PLEA. THE JUDGE THEN TOLD ME TO TALK TO MY LAWYER ONLY AFTER TALKING TO ATTORNEY CUTTER OF RECORD DID I WAIVE MY RIGHTS. PLEASE LET THE HONORABLE COURT OF APPEALS EXAMIN THE INFO I HAVE SUBMITTED AS PROOF THAT I NEVER WANTED TO PLEAD GUILTY AND I ONLY DID SO BECAUSE OF THE ADVICE OF ATTORNEY CUTTER WHO ALSO PROMISED ME I COULD APPEAL MY CASE AND COME BACK TO COURT HE LIED TO ME. THIS CASE IS BASED ON SOME ONE WHO SUFFERS FROM MENTAL & PHYSICAL ILLNESSES AND DISABILITIES AND WHO DID NOT UNDERSTAND ANY OF THE FACTS OF THE PLEA OR THE CONSEQUENCES OF THE PROCEEDINGS. THIS PLEA WAS NOT VOLUNTARILY AND KNOWINGLY ENTERED INTO. PLEASE REVIEW THE INFORMATION I HAVE SUBMITTED SO AS TO HAVE AN ABSOLUTE UNDERSTANDING ON HOW AND WHY I PLEAD PLEASE. THE INFORMATION SUBMITTED IS PART OF THIS BRIEF

Pursuant to Rule 203 (B)(iv) of the South Carolina Appellate Court Rules, the Defendant, Andrew Lee Blackmon, is appealing a negotiated guilty plea in front of the Honorable W. Jeffrey Young on November 5, 2013. The Defendant contends that his guilty plea was not freely and voluntarily entered into because the Court did not allow the Defendant to proceed with an insanity defense at trial due to timely notice not being properly filed under Rule 5(f) of the South Carolina Rules of Criminal Procedure. The Defendant argues that the trial court erred by not allowing the Defendant to receive a second independent competency evaluation that may have aided the Defendant's insanity defense.

The Defendant along with his wife co-Defendant were arrested on January 25, 2013 for Entering a Bank with the Intent to Steal under Section 16-11-380 of the South Carolina Code. The State and Defendant consented to a M'Naughten competency evaluation on March 15, 2013. The Defendant received the evaluation on May 7, 2013. On May 30, 2013, South Carolina Department of Mental Health returned a report stating that the Defendant knew right from wrong at the time of the incident and was competent to stand trial. The Defendant produced a letter from Cynthia S. Carter MD who diagnosed him as Bipolar Disorder, Type I on December 29, 2009. During the evaluation period, Dr. Carter relocated her practice and boxed up her client's records making them unavailable for the evaluation. On October 14, 2013, the Defendant was one of 128 cases placed on the Clarendon County Trial Docket. On October 31, it was brought to the Court's attention the murder case going forward on November 4, 2013 could not proceed due to a severe medical diagnosis of that Defendant's counsel. On that day, this Defendant received a plea offer from the State. Counsel informed the Defendant of that plea offer and he refused to consider it citing the problems with the May 7th evaluation and that he needed a second evaluation or a chance to argue Insanity as an affirmative defense. Defendant filed a Notice of Insanity Defense with the Court and upon the State on November 1, 2013.

On Monday November 4, 2013, the Defendant made a motion for continuance, a motion for an independent evaluation, a motion for another state evaluation, a motion to argue Insanity Defense for good cause under Rule 5(f) under the South Carolina Rules of Criminal Procedure and the Defendant personally made a motion to relieve counsel. The Court denied the Defendant's motion for continuance, but allowed the trial to start on Tuesday November 5, 2013. The court denied the motions for an independent evaluation and a motion for a separate state evaluation and took the motion to argue Insanity under advisement until November 5, 2013. The court gave the Defendant the option of proceeding to trial with present counsel or representing himself.

On Monday, the Defendant spent several hours discussing with counsel the advantages and disadvantages of pleading guilty and going to trial. The Defendant refused to focus on potential defenses with the trial, but continued to state that the May 7th evaluation was incorrect and accompanied by conspiracy and fraud. The Defendant's counsel was granted permission to speak with the co-Defendant, Virginia Blackmon, about the facts and circumstances of the crime alleged in addition to the Defendant's mental history. The co-Defendant accompanied

7 Pg 8 of 12
Exp 12 of 12
of EVAL

PROOF I DID NOT REMEMBER WHAT I DID THE MORNING OF
SENSE MY VERSION OF EVENTS THAT TOOK PLACE ON 1/25/13
WERE NOT CORRECT HOW CAN CANTAINAL SOURCES DESCRIBE MY
ACTIONS ON THAT DAY TO EVALUATORS IMPOSSIBLE THEY LIED

Defendant's counsel to the Clarendon County Detention Center to meet with the Defendant.

During this meeting, it was brought to the Defendant's attention that the Defendant's version of the events that took place were incorrect. The medicine the Defendant was taking during the time of the alleged incident was not the correct medicine according to his co-defendant, who is his caretaker and wife. Further, the Defendant had claimed ancillary activities that counsel knew could not have fit the timeline of events but the Defendant refused to accept that until informed by his co-Defendant wife. After several hours of communication, the Defendant, against the advice of counsel, wished to turn down a plea offer of ten years in the South Carolina Department of Corrections and proceed to trial. The next morning the Court informed counsel that he was not allowing the Defendant to argue insanity to the jury by the use of lay witnesses or potential expert witnesses for failure to comply with Rule 5(f) of the South Carolina Rules of Criminal Procedure as there was no good cause shown to the court.

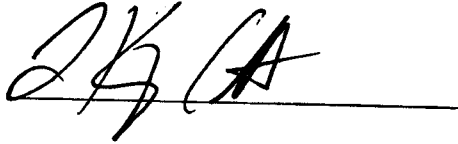
The Defendant was made aware of the Court's ruling. After extended talks with the counsel, the co-defendant and co-defendant's counsel, the Defendant wished to take the State's offer of ten years in the South Carolina Department of Corrections. The State then informed Defense counsel that the ten year offer needed the victim's consent. The Victim did not consent and a fifteen year offer was extended. The Defendant accepted the offer and signed the plea sheet. However, during the plea, the Defendant did not agree with the facts alleged on the Indictment. Therefore, the Defendant proceeded to trial. Before breaking for lunch, the State produced five witnesses, three videos showing the Defendant give the teller a note and receive money and the note that was used. Further, the first witness was the teller who testified that she felt threatened and intimidated as required by the statute.

After lunch, the State allowed the Defendant to enter a guilty plea to the original fifteen years offered by the State due to a multitude of factors. The guilty plea would be a negotiated guilty plea as the Court typically controls punishment once the jury is sworn. The Defendant proceeded in the guilty plea stating that he was entering the plea freely and voluntarily. The Court accepted the plea and followed the recommendation of fifteen years with credit for time served.

The Defendant contends that because of the inability to argue insanity to the jury or receive a second or independent evaluations, he did not enter his plea freely and voluntarily. After Monday November 4, 2013, the Defendant had options of going to trial facing thirty years with a substantial amount of evidence of his guilt or pleading guilty to fifteen years. In *Ake v. Oklahoma*, 470 U.S. 68, 105 S. Ct. 1087, 84 L.Ed. 2d 53 (1985), (cited with approval by *Bailey v. State*, 309 S.C. 455, 424 S.E.2d 503 (1992)). When an indigent defendant seeks psychiatric assistance to establish an insanity defense, and there is evidence this is a potentially viable defense, the state is constitutionally mandated to provide the defendant with access to a competent psychiatrist who will conduct an appropriate examination and assist in evaluation, preparation and presentation of the defense. Further, under S.C. Statute 44-23-410 (C), the Court may order the Defendant to be examined by an additional independent expert and designate the

time and conditions of the evaluation. Here, the Defendant was in the Clarendon County Detention Center, had no intentions of attempting to bond out of jail and simply wanted an opportunity to fully explore his mental issues. That was not allowed, thereby, forcing Mr. Blackmon to enter into a plea that was not freely and voluntarily given.

Date:

A handwritten signature in black ink, appearing to read 'L. King Cutter', written over a horizontal line.

L. King Cutter
Clarendon County Public Defender
PO Box 339
Manning, SC 29102
(803) 433-0188

THE STATE OF SOUTH CAROLINA)
COUNTY OF CLARENDON)

IN THE COURT OF GENERAL SESSIONS
THIRD JUDICIAL CIRCUIT
Indictment Nos.: 2013-GS-14-~~14~~ 70

THE STATE OF SOUTH)
CAROLINA)

v.)

**MOTION FOR
CONTINUANCE**

ANDREW LEE BLACKMON,)

DEFENDANT.)

TO: The Administrative Judge for the Third Judicial Circuit, George C. James, Jr., The Honorable W. Jeffrey Young, the Honorable Third Judicial Circuit Solicitor, Chip Finney and , assigned Assistant Solicitor Christopher DuRant.

COMES NOW the Defendant, Andrew Lee Blackmon , by and through his/her undersigned counsel, moves this Honorable Court for a continuance based on the following:

1. Defendant was arrested on January 25, 2013 for Entering a Bank with the Intent to Steal under Section 16-11-380 of the South Carolina Code ;
2. Counsel was appointed to represent Defendant through the County Public Defender's Office on February 19, 2013 when Counsel joined the Third Circuit Public Defender's Office ;
3. The State and the Defendant consented to M'Naughten competency evaluation on March 15, 2013. Defendant received the evaluation on May 7, 2013. On May 30, 2013, the report was returned by the South Carolina Department of Mental Health stating that the Defendant knew right from wrong at the time of the incident and was competent to stand trial. Counsel received discovery from the Solicitor's Office on June 3, 2013;
4. Counsel was informed and believed since his representation of the Defendant that the Defendant would enter a plea of guilty because of both the lack of a criminal history of the

Defendant and the substantial amount of evidence the State against the Defendant.

5. On Friday, November 1, 2013, the solicitor and counsel reviewed the video of the incident for the first time. From there, it was determined that the note used in this offense was in possession of law enforcement in addition to a Social Security card and knife found in the pocket of a pair of pants found near the crime scene. The state and counsel were both unaware of this evidence. *THEY KNEW ABOUT THIS THEY LIES ON THIS RECORD CONSPIRACY*

5. On Wednesday October 30, 2013, the murder trial that was first up for trial on November 4, 2013 was continued due to physical illness of defense counsel. On that day, the State issued a plea offer to the Defendant. Counsel relayed the plea offer to the Defendant at that time. The Defendant did not answer one way or another on the plea offer, but stated he would need to run it by his wife, a co-Defendant, in this case who is released on bond.

6. The Defendant was informed that he would be placed on the trial list for this week. The Defendant will not cooperate with counsel to develop a trial strategy with appropriate defense witnesses. The Defendant refuses to address the merits of the state's case against him, but continually states that there is a conspiracy out to get him and that he was mentally ill during the date and time in question. According to the Defendant, he has sent grievance letters to Mr. Jack Howle, Chief Public Defender for the Third Judicial Circuit, the Office of Disciplinary Counsel, State Law Enforcement Division and the South Carolina Attorney General's office.

7. ~~The~~ Defendant refutes the findings of the court ordered evaluation by the South Carolina Department of Mental Health. ~~The~~ Defendant believes it is necessary to have an independent evaluation performed to assist with an Insanity defense.

8. The Defendant would not present names of individuals he spoke with on the morning of the incident in question. The Defendant refused to allow me to contact his co-

PG 12 OF 12 COLLATERAL SOURCES IF THEY KNEW HOW COULD HE NOT ALSO I GAVE CUTLER ALL THE INFO I HAD IN THE BEGINNING HE DID NOT USE ANY OF IT. EVEN WHEN HE FOUND OUT I DID NOT KNOW WHAT I DID THAT MORNING & ONLY REMEMBERED THE DAY BEFORE HE DID NOTHING

CONSPIRACY

defendant wife to assist in a defense, even after receiving permission from her counsel.

5. Counsel for Defendant informed the Solicitor's Office on Thursday October 31, 2013 that counsel was not ready to proceed to trial because of the lack of communication between the Defendant and counsel, the need for an independent evaluation to assist in an Insanity defense, the lack of prejudice suffered by the state as the Defendant is and will remain incarcerated until a disposition of this charge is made.

WHEREFORE, for the foregoing reasons, Defendant prays that this Court:

(1) Grant a continuance in the above captioned matter until the next term of court in December 2013 for the need for an independent evaluation, a chance to allow counsel to speak with potential character witnesses or experts, review the full discovery, continue plea negotiations with the state or

(2) Order whatever the Court deems just and proper.

Respectfully submitted,

CLARENDON COUNTY PUBLIC DEFENDER

By: 

L. King Cutter
PO Box 339

Manning, SC 29102

Date: November 4, 2013

CUTTER WAITED TO LATE TO FILE THE MUCH
NEEDED MOTIONS LIKE I ASKED HIM TO DO LONG
BEFORE THIS DATE CONSPIRACY

STATE OF SOUTH CAROLINA
COUNTY OF CLARENDON

IN THE COURT OF GENERAL SESSIONS
THIRD JUDICIAL CIRCUIT
CASE #: 2013-GS-14-14

State of South Carolina,)
)
Plaintiff,)
)
vs.)
)
Andrew Lee Blackmon,)
)
Defendant.)

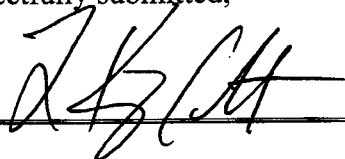
NOTICE OF INSANITY DEFENSE

Pursuant to Rule 5(f) of the South Carolina Rules of Criminal Procedure and in response to the request for such by the State, the above-captioned defendant hereby gives notice that he intends to offer an Insanity Defense to the offense(s) alleged in the above captioned indictment.

BEULAH G. ROBERTS
CLERK OF COURT
CLARENDON COUNTY, SC
2013 NOV - 1 PM 3:32

Furthermore, Defendant hereby requests that the State serve upon him, by and through his undersigned counsel, the names and addresses of witnesses upon whom the State intends to rely to establish Defendant's presence at the scene of the alleged crime, said request made pursuant to Rule 5(e)(2) of the South Carolina Rules of Criminal Procedure.

Respectfully submitted,



L. King Cutter
Attorney for Andrew Lee Blackmon

**CERTIFIED TRUE COPY
OF ORIGINAL FILED IN THIS OFFICE**
DATE 10/1/13
Beulah G. Roberts
CLERK OF COURT
CLARENDON COUNTY, SC

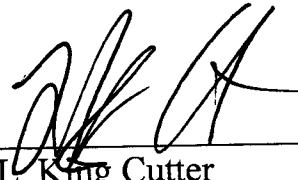
6) Are you or any immediate family members familiar with the symptoms and effects of Bipolar Disorder or Post-Traumatic Stress Disorder?

7) Have you or any immediate family members ever suffered a seizure?

Manning, South Carolina

November 4, 2013

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'L. King Cutter', written over a horizontal line.

L. King Cutter

Lee County Public Defender

PO Box 339

Manning, South Carolina 29102

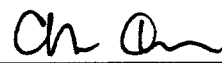
(803) 433-0188

Having complied with the defendant's request, the State hereby requests the information subject to disclosure under Rule 5(b)(1)(A)&(B).

The State hereby requests information subject to Rule 5(e)(1) Notice of Alibi; Rule 5(f) Notice of Insanity Defense or Plea of Guilty but Mentally Ill; and any intent of the defendant to rely upon the defenses of necessity or self-defense.

This Motion is pursuant to Circuit Rule 5, upon compliance by the prosecution with the defendant's previous Motion for Discovery and Disclosure based upon the same circuit court rule. The duty to make said disclosure is a continuing duty up to and during trial.

?



Christopher Durant
Assistant Solicitor
Third Judicial Circuit

Manning, South Carolina

June 3, 2013

STATE OF SOUTH CAROLINA

IN THE COURT OF GENERAL SESSIONS

THIRD JUDICIAL CIRCUIT

CASE #: 2013-GS-14-~~14~~ 10

COUNTY OF CLARENDON

State of South Carolina,)

Plaintiff,)

Jury Voir Dire

vs.)

Andrew Lee Blackmon,)

Defendant.)

- 1) Have you or your immediate family ever been a victim of a crime?

- 2) Are you or your immediate family close personal relations, family or friends with any member of law enforcement?

- 3) Have you or your family ever been a customer at the Bank of Clarendon?

- 4) Have you or your immediate family ever been employed by the Bank of Clarendon?

- 5) Are you a contributor or member of any organization that supports, contributes or aids law enforcement?

SUBPOENA IN A CRIMINAL CASE

SOUTH CAROLINA GENERAL SESSIONS COURT	COUNTY CLARENDON
STATE	CASE NO. 2013-GS-14-0104
v.	SUBPOENA FOR
ANDREW LEE BLACKMON	<input checked="" type="checkbox"/> PERSON <input type="checkbox"/> DOCUMENT(S) OR OBJECT(S)

TO: **Gregory Smith, MD
Clarendon Mental Health
215 Commerce Street
Manning, SC 29102**

YOU ARE HEREBY COMMANDED to appear in the above named court at the place, date, and time specified below to testify in the above-entitled case.

PLACE: Clarendon County General Sessions Court Magistrate/ Family Court Building 102 S. Mill Street Manning, SC 29102	COURTROOM To be announced
	DATE AND TIME Wednesday, November 6, 2013 at 9:30 AM

YOU ARE ALSO COMMANDED to bring with you the following document(s) or object(s).

LIST DOCUMENT(S) OR OBJECT(S):
any & all medical records for the defendant

This subpoena shall remain in effect until you are granted leave to depart by the court or by an officer acting on behalf of the court.

CLERK OF COURT	DATE
(BY) DEPUTY CLERK	

THIS SUBPOENA IS ISSUED UPON APPLICATION OF THE:	ATTORNEY'S NAME AND ADDRESS
<input type="checkbox"/> SOLICITOR <input checked="" type="checkbox"/> DEFENDANT	King Cutter, Public Defender Clarendon County Public Defender Post Office Box 339 MANNING, SC 29102 Phone -803-433-0188

PROOF OF SERVICE

SERVED	DATE	PLACE
SERVED ON (PRINT NAME)	MANNER OF SERVICE	
SERVED BY (PRINT NAME)	TITLE	

DECLARATION OF SERVER

I certify that the foregoing information contained in the Proof of Service is true and correct.

Executed on _____ DATE _____ SIGNATURE OF SERVER _____

ADDRESS OF SERVER _____

SUBPOENA IN A CRIMINAL CASE

SOUTH CAROLINA GENERAL SESSIONS COURT	COUNTY CLARENDON
STATE	CASE NO. 2013-GS-14-0104
v.	SUBPOENA FOR
ANDREW LEE BLACKMON	<input checked="" type="checkbox"/> PERSON <input type="checkbox"/> DOCUMENT(S) OR OBJECT(S)

TO: **Gregory Smith, MD**
Clarendon Mental Health
215 Commerce Street
Manning, SC 29102

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any and all medical records for defendant
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CLERK OF COURT	DATE
(BY) DEPUTY CLERK	

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<input type="checkbox"/> SOLICITOR <input checked="" type="checkbox"/> DEFENDANT	King Cutter, Public Defender Clarendon County Public Defender Post Office Box 339 MANNING, SC 29102 Phone -803-433-0188

PROOF OF SERVICE

SERVED	DATE	PLACE
SERVED ON (PRINT NAME)	MANNER OF SERVICE	
SERVED BY (PRINT NAME)	TITLE	

DECLARATION OF SERVER

I certify that the foregoing information contained in the Proof of Service is true and correct.

Executed on _____ DATE _____ SIGNATURE OF SERVER

_____ ADDRESS OF SERVER

ROXCOMP

29

~~December 29, 2009~~

RE: Andrew Blackmon (DOB 9/16/70)

To Whom It May Concern:

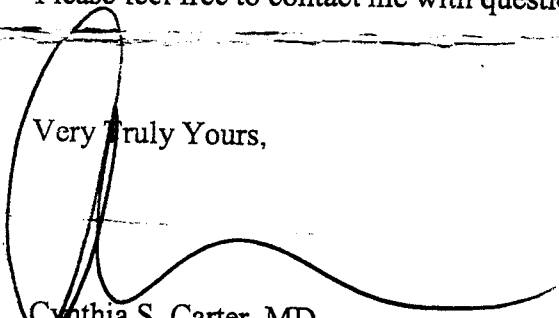
Andrew Blackmon is a patient under my care for the treatment of Bipolar Disorder, Type I. In my view, his symptoms of irritability, explosive tendencies, and inconsistent mood render him unable to work in any form of employment.

Prescribed medications include:

1. Prozac (an antidepressant also useful in the treatment of anxiety) 40 mg daily
2. Lamictal (a mood stabilizer) 25 mg daily for seven days then 50 mg daily for seven days then 75 mg daily for seven days then 100 mg daily
3. Trazodone 150 mg at bedtime

Please feel free to contact me with questions or concerns.

Very Truly Yours,


Cynthia S. Carter, MD
Diplomat, American Board of Psychiatry and Neurology

ROXCOMP

July 31, 2009

To Whom It May Concern:

This letter is to provide information about my client Mr. Andrew Blackmon, DOB 9/16/70. I have been providing mental health services to Mr. Blackmon since November 2008. During this time, he has presented with passive suicidal and homicidal ideations on several occasions. He has experienced depressed mood where he could not leave his home and neglected personal hygiene and care. He has ongoing anxiety including being easily irritated. When he perceives even the mildest of disrespect (emotional, verbal or behavioral) from anyone, regardless of their relationship to him, he becomes irritated and is likely to exhibit emotionally, verbally and physically aggressive behavior. He has learned to isolate himself to limit contact with the public as much as possible in effort to control his anxiety, limit being irritated and being in situations where he may feel disrespected then engage in aggressive behavior.

Respectfully,

Steph Williams
Steph Williams, LADCI

MENTAL

ROXCOMP BEHAVIORAL HEALTH

435 Warren Street, Roxbury, MA 02119

Tel: 442-7400 • Fax (617) 541-3797



University of Massachusetts

Disability Evaluation Services
P.O. Box 2795
Worcester, MA 01613-9938
Toll Free 1-800-888-3420
Toll Free TTY 1-866-693-1390 (for the deaf and hard of hearing).

Esta noticia afecta sus derechos a responsabilidades y debe ser traducida en seguida. Si Usted necesita ayuda en traducir esta noticia, su oficina del Department of Transitional Assistance le asignara un trabajador de la oficina que es bilingue o un interprete para asistirle a ud.

September 22, 2010

Andrew Blackmon

7 Rosa St

Case#: 631109

HYDE PARK, MA 02136

Dear Andrew Blackmon:

As an applicant or recipient of the Emergency Aid to the Elderly, Disabled, and Children (EAEDC) Program, you have stated that you are disabled. The Disability Evaluation Services Program was asked to review information about you and decide whether you are disabled.

We have decided that you have a disability that is expected to last through:

March 22, 2011 PTSD

If you have any questions about this notice, please call your worker at the local Transitional Assistance Office.

Sincerely,

Disability Evaluation Services

MDCI820D SCDC HEALTH SERVICES SYSTEM/DISPLAY SOAP NOTES 05/05/14
SCDC#: 357777 BLACKMON, ANDREW LEE CURR LOC: MCCORMICK C053986
ENC LOC: KIRKLAND ENC#: 00013 DATE: 01/21/14 TIME: 11:56 COMP PAGE: 001

43 YO BM SERVING 15 YRS FOR BANK ROB. I/M TAKING DOXEPIN AND PROZAC (ALSO
GETTING DILANTIN FOR SEIZURES). CURRENTLY, "TERRIBLE". C/O DEPRESSION,
HAS CRIED ONCE, EASILY IRRITABLE, NIGHTMARES, RESTLESS SLEEP AND LOW E.
-S/H AND NOT HEARING VOICES.

PAST PSYCH: FIRST TX IN 2008. DX WITH PTSD AND BPAD. WAS GETTING TX IN
BOSTON BUT NO PSYCH TX IN THE 3 YRS PRIOR TO ARREST. WAS PUT ON PROZAC
AND TRAX BY MH WHEN IN JAIL SWITCHED TO DOXEPIN AND PROZAC HERE. DENIES
DRUG PROBLEM BUT HEAVY DRINKING PRIOR TO ARREST

MEDICAL: HTN, SEIZURE - DILANTIN

O: ALERT, GOT AGGITATED WHEN HE FELT HE WAS NOT GETTING ENOUGH TIME, CAME
WITH RECORDS THAT WERE DISORGANIZED AND MARKED UP, MOOD: IRRITABLE, NOT
OVERTLY PSYCHOTIC

A: BPAD, PTSD, ETOH DEP

IT'S NOT CLEAR THAT HE'S EVER TAKE A MED FOR BPAD

P: DC DOXEPIN, CONTINUE 20MG PROZAC BUT CHANGE TO QHS
ADD RISPERDAL 2MG QHS - DISCUSSED RISK BM/CHOL/TD
DRAW BLOOD IN ONE MONTH - CHEM 18
SUGGEST OPMH

ENCOURAGED SUB ABUSE GROUPS

SOAP NOTES/NARRATIVE DISPLAYED.

PF2 => PREV ENC PF3 => NEXT ENC PF7 => PREV PAGE PF8 => NEXT PAGE

MDCI820D SCDC HEALTH SERVICES SYSTEM/DISPLAY SOAP NOTES 05/05/14
SCDC#: 357777 BLACKMON, ANDREW LEE CURR LOC: MCCORMICK C053986
ENC LOC: KIRKLAND ENC#: 00013 DATE: 01/21/14 TIME: 11:56 COMP PAGE: 002

RISPERDAL 2MG TABS (RISPERIDONE)

SIG: TAKE ONE QHS

SIG:

START DATE: 01/21/14 TOTAL DAYS: 180

MD: HIGGINS, EDMUND -

FLUOXETINE 20MG (PROZAC)

SIG: TAKE ONE QHS

SIG:

START DATE: 01/21/14 TOTAL DAYS: 180

MD: HIGGINS, EDMUND -

SIGNED OFF ON 01/21/14 @ 12:07 BY EDMUND S HIGGINS, PSYCHIATRIST

MAR UPDATED. LAB SLIP FILLED OUT AND PLACED IN BOX.

SIGNED OFF ON 01/21/14 @ 16:16 BY JANET BRAZEL, REGISTERED NURSE I

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PF2 => PREV ENC PF3 => NEXT ENC PF7 => PREV PAGE PF8 => NEXT PAGE
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MDCI820D SCDC HEALTH SERVICES SYSTEM/DISPLAY SOAP NOTES 05/05/14
SCDC#: 357777 BLACKMON, ANDREW LEE CURR LOC: MCCORMICK C053986
ENC LOC: MCCORMICK ENC#: 00026 DATE: 04/03/14 TIME: 09:45 COMP PAGE: 001

I/M SEEN FOR FIRST TIME BY ME AFTER TRANSFER FROM R&E. DR. HIGGINS TOOK HIM OFF DOXEPIN, CHANGED PROZAC TO QHS AND STARTED RISPERDAL DUE TO SOME DISORGANIZED WRITINGS HE PRESENTED. DX PTSD, BPAD AND ETOH DEPENDENCE BUT UNCLEAR WHY BIPOLAR WAS ASSIGNED.

TODAY HE STATES PTSD IS DUE TO GROWING UP IN PROJECTS OF BOSTON, SEEING A LOT OF VIOLENCE AND BEING RAPED BY OLDER FEMALE COUSIN WHEN HE WAS 5-6 YO. REPORTS HE'S MOSTLY GOTTEN PAST THE CHILDHOOD TRAUMAS BUT AS AN ADULT HE CONTD TO WITNESS VIOLENCE AND LOST A LOT OF FAMILY MEMBERS TO HEALTH PROBLEMS--MOTHER DIED IN HIS ARMS. ALSO FOUND OUT A FEW MONTHS AGO THAT HIS SON IS WANTED FOR MURDER. RECENT MED CHANGES HAVE BEEN HELPFUL, SLEEPING BETTER W/ FEWER NIGHTMARES. MOOD IS LESS IRRITABLE BUT STILL GETS DEPRESSED EASILY. DENIES HOPELESSNESS OR SI. DENIES PSYCHOTIC SYMPTOMS. DOESN'T PRESENT ANY OBVIOUS SYMPTOMS OF RECENT/PAST MANIA.

O: CALM, POLITE. GOOD EYE CONTACT. SPEECH NORMAL RATE/VOLUME. MOOD- A LITTLE BETTER. TP- L/L/GD. TC- DENIES SI/HI. NO S/S OF PSYCHOSIS.

A: PTSD (PROVOSNAŁ), ETOH DEPENDENCE IN CONTROLLED SETTING, R/O BPAD? SEIZURE DISORDER (ON DILANTIN).

P: CONT CURRENT MEDS. CCC WILL FORWARD COPIES OF MEDICAL RECORDS HE HAS.

LABS ALREADY REVIEWED BY DR. HIGGINS AND REFERRED TO MEDICAL FOR HIGH CHOL.

SOAP NOTES/NARRATIVE DISPLAYED.

PF2 => PREV ENC PF3 => NEXT ENC PF7 => PREV PAGE PF8 => NEXT PAGE

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** ENCOUNTER: 42 MENTAL HEALTH CLINIC 07/14/14 8:50 MCCORMICK COMP
HSC II NOTE: PER DR. WOOD, THIS INDIVIDUAL CAN RECEIVE A COPY OF HIS
MENTAL HEALTH RECORDS. JIM PAGE, HSC II
SIGNED OFF ON 07/14/14 @ 8:50 BY JAMES EDWIN PAGE, HUMAN SERVICES COORD II

** ENCOUNTER: 40 MENTAL HEALTH CLINIC 07/03/14 9:45 MCCORMICK COMP
F/U FOR PTSD (PROVISIONAL), ETOH DEPEND IN CONTROLLED SETTING AND UNLIKELY
BIPOLAR DISORDER. ALSO ON DILANTIN FOR SEIZURE DISORDER. AT LAST APPT
I CONTD HIM ON RISPERDAL AND PROZAC. AT HIS REQUEST I ALSO REVIEWED HIS
FORENSIC REPORT. TODAY HE REPORTS HE'S DOING OK BUT HE'S STILL UPSET ABOUT
THE FINDINGS IN HIS FORENSIC REPORT. SPECIFICALLY, HE DOESN'T LIKE THE
LABEL OF ANTISOCIAL PERSONALITY D/O AND THE CONCLUSION ABOUT HIS CAPACITY
TO CONFORM CONDUCT. HE'S EAGER TO APPEAL HIS CASE AND GET A SECOND OPINION
ON HIS MENTAL STATE AT THE TIME OF THE CRIME. HE ASKED ME TO WRITE A
LETTER WITH MY OPINION BUT I REMINDED HIM THAT MY ROLE IS STRICTLY TO
DIAGNOSE AND TREAT CURRENT MENTAL HEALTH PROBLEMS, NOT TO SECOND GUESS THE
OPINIONS OF THE COURT APPOINTED FORENSIC EXAMINERS. HE SEEMED TO ACCEPT
THIS. OTHERWISE, HE REPORTED THAT HE'S COPING PRETTY WELL WITH HIS
CIRCUMSTANCES. HE DENIED PSYCHOTIC SYMPTOMS AND HIS APPETITE AND ENERGY
ARE FINE. HE IS ABLE TO FOCUS ON HIS LEGAL MATERIALS FINE. HE SAID HE
STILL HAS FREQUENT DREAMS/NIGHTMARES ABOUT VIOLENCE HE'S WITNESSED IN THE
PAST HE'S SO USED TO IT NOW THAT IT DOESN'T REALLY AFFECT HIM MUCH. HE
DENIED SIDE EFFECTS FROM MEDS.
O: CALM, POLITE, FAIR EYE CONTACT BUT PERSEVERATES ON HIS FORENSIC REPORT.
TP- L/L/GD. TC- DENIES HOPELESSNESS OR SI/HI NOW BUT ADMITS THAT LAST
MONTH HE FELT SOME SI DUE TO FRUSTRATION ABOUT CASE. NO S/S OF PSYCHOSIS OR
MANIA.

A: NO CHANGE

P: CONTINUE MEDS. HE AGREES TO HAVE LIPIDS/GLUCOSE CHECKED.

*****LABS- FASTING LIPIDS AND A1C*****

P> RISPERDAL 2MG TABS (RISPERIDONE)

SIG: ONE PO QHS

SIG:

START DATE: 07/03/14 TOTAL DAYS: 180

MD: FERLAUTO, MICHAEL -

FLUOXETINE 20MG (PROZAC)

SIG: ONE PO QHS

SIG:

START DATE: 07/03/14 TOTAL DAYS: 180

MD: FERLAUTO, MICHAEL -

SIGNED OFF ON 07/03/14 @ 11:26 BY MICHAEL J FERLAUTO, UNCLASSIFIED

LAB SLIP COMPLETED AND MAR UPDATED.

SIGNED OFF ON 07/03/14 @ 12:07 BY ANGELA T SMALLEY, REGISTERED NURSE II

** ENCOUNTER: 38 MENTAL HEALTH CLINIC 06/18/14 10:36 MCCORMICK COMP
D: MET WITH INMATE BLACKMON FOR AN INDIVIDUAL COUNSELING SESSION.
INMATE BLACKMON APPEARED RESTLESSNESS. HE STATED, "I AM ALIVE," WHEN
WRITER ASKED HIM HOW HE WAS DOING. HE STATED THAT HE HAS BEEN HAVING
NIGHTMARES ABOUT VIOLENCE AND STATED THAT SOME OF THE EVENT HAPPEN IN
HIS PROJECTS BACK IN BOSTON. HE STATED THAT HIS SON WAS ARRESTED FOR

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MURDER LAST WEEK AND HE HAS NOT HEARD ANYTHING ELSE YET. HE STATED THAT HIS APPETITE IS OKAY AND WHEN HE HAS NIGHTMARES HE WILL STAY UP FOR A LITTLE WHILE BUT FALLS BACK TO SLEEP. HE STATED HAS NOT CONTACT WITH HIS FAMILY IN BOSTON BUT HAS MODERATE FAMILY CONTACT WITH HIS WIFE IN SC. HE STATED THAT IN HIS SPARETIME HE PACES THE FLOOR THINKING ABOUT HIS CASE AND READS WITH THE ABILITY TO FOCUS AND CONCENTRATE. HE DOES NOT INTERACT IN THE DORM AND STATED THAT HE GETS ALONG WITH HIS ROOMMATE. HE STATED HE HAD SOME SUICIDAL THOUGHTS LAST WEEK BUT HE USED SOME BOOKS FROM HIS JEHOVAH WITNESS MATERIALS TO TALK HIMSELF OUT OF IT. INMATE DENIED SUICIDAL AND HOMICIDAL THOUGHTS AT THIS TIME. INMATE AND WRITER DISCUSSED REACHING OUT TO MH OR SOMEONE THAT HE TRUSTS IN THE INST. TO TALK TO HIM WHEN HE HAS THOSE FEELS. INMATE AND WRITER DISCUSSED POSITIVE SELF TALK TO DEAL WITH STRESSFUL DAYS. INMATE WAS RECEPTIVE AND WRITER GAVE INMATE AN ASSIGNMENT ON HOW TO FURTHER USE THESE COPING SKILLS OUTSIDE OF THERAPY SESSIONS. INMATE DISCUSSED HIS CASE WITH WRITER AND THAT HE IS RELYING HEAVILY ON THE ASSESSMENT OF THE PSYCHIATRIST TO GET HIM OUT THIS BID. HE EXPRESSED FRUSTRATION WITH BEING IN PRISON BECAUSE HE FEELS LIKE HIS MENTAL ILLNESS WAS NOT TREATED PROPERLY BEFORE HE COMMITTED HIS CRIME.

A:DX: PTSD, PROVISIONAL

GAF: 88

INMATE MOOD EUTHYMIC WITH CONSTRICTED AFFECT, NO OVERT PSYCHOTIC SXS OBSERVED, ALERT AND ORIENTED IN ALL SPHERES, SPEECH-UNDRSTANDABLE AND CLEAR, EYE CONTACT-GOOD, THOUGHTS-ORAGNIZED, HALLUCINATIONS/DELUSIONS-DENIED, SUICIDAL/HOMICIDAL THOUGHTS-DENIED

P: INDIVIDUAL COUNSELING SESSION EVERY 90 DAYS OR PRN. PSYCH CLINIC EVERY 90 DAYS OR PRN.

SIGNED OFF ON 06/18/14 @ 10:55 BY ASHLEY SHARMANE MADDOX-WASHINGTON, HUMAN SE

** ENCOUNTER: 37 MENTAL HEALTH CLINIC 06/09/14 14:27 MCCORMICK COMP
INC NOTE

INMATE SCHEDULED FOR AN INDIVIDUAL COUNSELING SESSION ON TODAY.

YARD ON LOCK-DOWN. INMATE WILL BE RESCHEDULED.

SIGNED OFF ON 06/09/14 @ 14:27 BY ASHLEY SHARMANE MADDOX-WASHINGTON, HUMAN SE

** ENCOUNTER: 30 MENTAL HEALTH CLINIC 04/29/14 11:59 MCCORMICK COMP
OPEN IN ERROR

SIGNED OFF ON 04/29/14 @ 11:59 BY ASHLEY SHARMANE MADDOX-WASHINGTON, HUMAN SE

** ENCOUNTER: 29 MENTAL HEALTH CLINIC 04/21/14 10:05 MCCORMICK COMP
D: MET WITH INMATE BLACKMON FOR AN INDIVIDUAL COUNSELING SESSION PER INMATE REQUEST.

INMATE BLACKMON CAME INTO THE OFFICE WITH SOME PAPERWORK FROM HIS PAST PSYCHOLOGICAL REPORT. HE ASKED WRITER ABOUT "FAGUE", THE PURPOSE OF RISPERDAL, THE REASON WHY THE PSYCHOLOGIST DISGNOSED HIM WITH PTSD AND ASPD AND WHY THE PSYCHOLOGIST STATED THAT HE REMEMBERED EVERYTHING ON THE DAY OF CRIME EVEN THOUGH HE DID NOT. WRITER WAS ABLE TO ANSWER SOME OF THE QUESTIONS THAT MR. BLACKMON ASKED BUT WRITER SUGGESTED THAT HE WRITE THE PSYCHOLOGIST THAT WROTE THE REPORT BECAUSE IT WAS HER FINDINGS. HE STATED THAT HE DOES NOT THINK THAT IT WOULD

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HELP AND THAT HE WANTED THE PSYCHIATRIST HERE TO LOOK AT THE REPORT. WRITER MADE INMATE AWARE THAT DR. FERLAUTO DID HAVE A COPY OF THE RECORDS AND HE WOULD GO OVER IT WITH HIM AT HIS NEXT PSYCH CLINIC. INMATE THANKED WRITER AND STATED THAT HE WAS REALLY CONFUSED ABOUT THE CASE.

A: PTSD (PROVIOSNAL), ETOH DEPENDENCE IN CONTROLLED SETTING, R/O BPAD? SEIZURE DISORDER (ON DILANTIN).

GAF: 77

INMATE MOOD-CALM, AFFECT-CONFUSED, SPEECH-UNDERSTANDABLE/CLEAR, APPROACH-COOPERATIVE, EYE CONTACT-GOOD, THOUGHT-ORGANIZED, HALLUCINATIONS/DELUSIONS-DENIED, HOMICIDA/SUICIDAL-DENIED

P: INDIVIDUAL COUNSELING SESSION EVERY 90 DAYS OR PRN. PSYCH CLINIC EVERY 90 DAYS OR PRN.

SIGNED OFF ON 04/21/14 @ 10:13 BY ASHLEY SHARMANE MADDOX-WASHINGTON, HUMAN SE

** ENCOUNTER: 28 MENTAL HEALTH CLINIC 04/18/14 12:38 MCCORMICK COMP
TREATMENT TEAM NOTE
TREATMENT TEAM HELD TODAY. TREATMENT PLAN APPROVED. UPDATE IN SIX MONTHS. SEE MEDICAL RECORDS FOR A HARD COPY.
SIGNED OFF ON 04/18/14 @ 12:38 BY ASHLEY SHARMANE MADDOX-WASHINGTON, HUMAN SE

** ENCOUNTER: 26 MENTAL HEALTH CLINIC 04/03/14 9:45 MCCORMICK COMP
I/M SEEN FOR FIRST TIME BY ME AFTER TRANSFER FROM R&E. DR. HIGGINS TOOK HIM OFF DOXEPIN, CHANGED PROZAC TO QHS AND STARTED RISPERDAL DUE TO SOME DISORGANIZED WRITINGS HE PRESENTED. DX PTSD, BPAD AND ETOH DEPENDENCE BUT UNCLEAR WHY BIPOLAR WAS ASSIGNED.
TODAY HE STATES PTSD IS DUE TO GROWING UP IN PROJECTS OF BOSTON, SEEING A LOT OF VIOLENCE AND BEING RAPED BY OLDER FEMALE COUSIN WHEN HE WAS 5-6 YO. REPORTS HE'S MOSTLY GOTTEN PAST THE CHILDHOOD TRAUMAS BUT AS AN ADULT HE CONTD TO WITNESS VIOLENCE AND LOST A LOT OF FAMILY MEMBERS TO HEALTH PROBLEMS--MOTHER DIED IN HIS ARMS. ALSO FOUND OUT A FEW MONTHS AGO THAT HIS SON IS WANTED FOR MURDER. RECENT MED CHANGES HAVE BEEN HELPFUL, SLEEPING BETTER W/ FEWER NIGHTMARES. MOOD IS LESS IRRITABLE BUT STILL GETS DEPRESSED EASILY. DENIES HOPELESSNESS OR SI. DENIES PSYCHOTIC SYMPTOMS. DOESN'T PRESENT ANY OBVIOUS SYMPTOMS OF RECENT/PAST MANIA.
O: CALM, POLITE. GOOD EYE CONTACT. SPEECH NORMAL RATE/VOLUME. MOOD-A LITTLE BETTER. TP- L/L/GD. TC- DENIES SI/HI. NO S/S OF PSYCHOSIS.
A: PTSD (PROVIOSNAL), ETOH DEPENDENCE IN CONTROLLED SETTING, R/O BPAD? SEIZURE DISORDER (ON DILANTIN).
P: CONT CURRENT MEDS. CCC WILL FORWARD COPIES OF MEDICAL RECORDS HE HAS. LABS ALREADY REVIEWED BY DR. HIGGINS AND REFERRED TO MEDICAL FOR HIGH CHOL.
SIGNED OFF ON 04/03/14 @ 11:12 BY MICHAEL J FERLAUTO, UNCLASSIFIED

** ENCOUNTER: 23 MENTAL HEALTH CLINIC 03/25/14 11:55 MCCORMICK COMP
LABS
CHEM 18 WNL EXCEPT FOR CHOLESTEROL WHICH IS 269
P: PLEASE HAVE PT SEEN BY MEDICAL FOR ELEVATED CHOL
SIGNED OFF ON 03/25/14 @ 11:56 BY EDMUND S HIGGINS, UNCLASSIFIED
I/M WILL HAVE TO SIGN UP FOR SICK CALL. WILL FORWARD THIS TO THE MD FOR ANY REVIEW AND RECOMMENDATION. M. SCRUGGS, RN

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SIGNED OFF ON 03/25/14 @ 12:40 BY MATTHEW CLYDE SCRUGGS, UNCLASSIFIED
AGREE WITH SICK CALL ADVICE
SIGNED OFF ON 03/26/14 @ 6:34 BY JOHN B MCREE, PHYSICIAN II

** ENCOUNTER: 21 MENTAL HEALTH CLINIC 03/18/14 14:06 MCCORMICK COMP
D: MET WITH INMATE BLACKMON FOR AN INTAKE ASSESSMENT. INMATE BLACKMON IS A 43 YEAR OLD MALE SERVING A 15 YEAR SENTENCE FOR ENTERING A BANK WITH INTENT TO STEAL. RECENT TRANSFER FROM KIRKLAND. INMATE STATED THAT HE RECEIVED MENTAL HEALTH WHILE ON THE STREETS IN BOSTON, MASSCHUSETTS. INMATE STATED THAT HE HAD A NERVOUS BREAKDOWN BECAUSE HIS MOTHERS DIED IN HIS HANDS, BROTHER ATTEMPTED SUICIDE, COUSINS BOY FRIEND TRIED TO KILL HER, AND HIS SON WAS WANTED FOR A MURDER CHARGE AND ALL OF THIS OCCURED IN ONE MONTHS. INMATE STATED THAT HE COMMITTED HIS CRIME BUT STATES THAT HE DOES NOT REMEMBER DOING IT. I/M STATED THAT HIS GIRLFRIEND WHO ALSO SUFFERS FROM A MENTAL HEALTH ILLNES S WROTE A NOTE FOR HIM AND HE TOOK THAT NOTE INTO THE BANK AND ASKED FOR MONEY. EVERYTIME WRITER ASKED INMATE WHAT HE IS CURRENT ISSUE/MH PROBLEMS/ SXS WERE HE RELATED IT BACK TO THE DAY OF HIS CRIME. INMATE DENIED ISSUES WITH APPETITE AND SLEEP. INMATE STATED THAT USED ALCOHOL EVERYDAY. INMATE DENIED ILLICIT ALCOHOL USE. INMATE DENIED SUBSTANCE ABUSE TREATMENT. INMATE STATED THAT HE IS MEDICATION COMPLAINT AND STATED THAT THE MEDICATION IS NOT WORKING AND HE WANTS AN INCREASE. INMATE DENIED DELUSION/HALLUCINATIONS. INMATE REPORTED THAT HIS MOTHER WAS DIAGNOSED WITH SPLIT PERSONALITY AND HIS BROTHER HAS DEPRESSION SCHIZOPHRENIA INMATE STATED THAT HE TRIED TO COMMIT SUICIDE 13 YEARS AGO. INMATE DENIED CRIMINAL HX IN HIS FAMILY. INMATE DENIED FAMILY SUPPORT. INMATE STATED THAT HE IS STILL MARRIED. INMATE STATED THAT HE COMPLETED THE 7TH GRADE AND WAS NOT ENROLLED IN G.E.D COURSES. INMATE STATED THAT HE WAS SEXAULLY ABUSED AND DID NOT RECEIVE TREATMENT. INMATE DENIED JUVENILE INCARCERATIONS
A:DX: BPAD, PTSD, ETOH DEP
GAF: 76
INMATE MOOD-NERVOUS, AFFECT-OPEN, GROOMING-GOOD, SPEECH-UNDERSTANDABLE/CLEAR, APPROACH-COOPERATIVE, CONVERSATION-DIFFICULT TO FOLLOW, THOUGHT-SIMPLISTIC, HALLUCINATIONS/DELUSIONS-DENIED, SUICIDAL/HOMICIDAL-DENIED
P: INMATE CONSISTENTLY ASKED FOR HIS MENTAL HEALTH RECORDS IN WHICH HE WAS INFORMED ON HOW TO GO ABOUT GETTING THEM. INMATE ALSO WANTED TO KNOW WHY HE WAS TRANSFERRED TO MCCI AS OUTPATIENT BECAUSE HE FELT LIKE HE NEEDS TO BE SEEN MORE THAN EVERY THREE MONTHS. INDIVIDUAL COUNSELING SESSION EVERY 90 DAYS OR PRN. PSYCH CLINIC EVERY 90 DAYS OR PRN.
SIGNED OFF ON 03/18/14 @ 14:39 BY ASHLEY SHARMANE MADDOX-WASHINGTON, HUMAN SE

** ENCOUNTER: 15 MENTAL HEALTH CLINIC 02/05/14 11:55 KIRKLAND COMP
MENTAL HEALTH NOTE
D: COUNSELOR SPOKE WITH I/M IN THE MEDICAL ANNEX IN RESPONSE TO A STAFF REQUEST SENT BY I/M REQUESTING TO SPEAK TO A COUNSELOR. I/M INFORMED COUNSELOR THAT HE, " WANTED TO BE PUT IN A PLACE WHERE HE COULD SEE A MENTAL HELATH COUNSELOR ON A REGULAR BASIS, AND WILL BE TREATED BY A PSYCHIATRIST". COUNSELOR NOTED THAT I/M HAD ALREADY SEEN THE PSYCHAITRIST. I/M STATED THAT HE, " DIDN'T KNOW WHAT MEDICATIONS THE PSYCHIATRIST PUT HIM ON". COUNSELOR CHECKED I/M'S MEDICATIONS ON CRT,

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AND NOTED THAT I/M WAS PRESCRIBED RISPERDAL, AND PROZAC. I/M INQUIRED ABOUT THE MG'S OF PROZAC HE WAS PRESCRIBED. COUNSELOR NOTED THAT I/M WAS CURRENTLY PRESCRIBED 20MG'S OF PROZAC DAILY. I/M STATED THAT HE, " TOOK 40 MG'S OF PROZAC ON THE STREET". COUNSELOR INFORMED I/M THAT COUNSELOR COULD SPEAK TO THE PSYCHIATRIST AND LET HIM KNOW ABOUT I/M'S CONCERN ABOUT HIS MEDICATION LEVELS. COUNSELOR FURTHER NOTED THAT I/M HAS BEEN REFERRED TO OUT PATIENT MENTAL HEALTH, WHERE HE WOULD RECEIVE COUNSELING EVERY 30 DAYS, AND SEE A PSYCHIATRIST EVERY 90 DAYS. I/M REPORTED THAT HE, " HAD BEEN CONCERNED THAT HE, " WOULD NOT GO TO A YARD WHERE HE WOULD GET ANY MENTAL HEALTH TREATMENT". I/M FURTHER CLAIMED THAT HE, " WOULD DO GOOD SEEING A COUNSELOR AND PSYCHIATRISAT ON A REGULAR BASIS. COUNSELOR INFORMED I/M THAT HE WOULD SPEAK TO THE PSYCHIATRIST REGARDING I/M'S CONCERNS. I/M THANKED COUNSELOR .

- A: I/M HAD AN APPROPRIATE AFFECT, AND HE PRESENTED A CALM MOOD. I/M ALSO MADE GOOD EYE CONTACT, AND HE SPOKE WITH CLEAR, GOAL DIRECTED SPEECH. I/M DENIED HAVING ANY SI OR HI, AND HE DID NOT APPEAR TO BE RESPONDING TO ANY PERCEPTUAL DISTURBANCES.
- P: COUNSELOR WILL SPEAK TO PSYCHIATRIST REGARDING I/M'S CONCERNS. I/M WILL ALSO CONTINUE TO BE MONITORED IN ACCORDANCE WITH PROTOCOL.

GOODSON/CCC III

SIGNED OFF ON 02/05/14 @ 12:13 BY CHARLES T GOODSON JR, HUMAN SERVICES COORD

- ** ENCOUNTER: 13 MENTAL HEALTH CLINIC 01/21/14 11:56 KIRKLAND COMP
43 YO BM SERVING 15 YRS FOR BANK ROB. I/M TAKING DOXEPIN AND PROZAC (ALSO GETTING DILANTIN FOR SEIZURES). CURRENTLY, "TERRIBLE". C/O DEPRESSION, HAS CRIED ONCE, EASILY IRRITABLE, NIGHTMARES, RESTLESS SLEEP AND LOW E. -S/H AND NOT HEARING VOICES.
- PAST PSYCH: FIRST TX IN 2008. DX WITH PTSD AND BPAD. WAS GETTING TX IN BOSTON BUT NO PSYCH TX IN THE 3 YRS PRIOR TO ARREST. WAS PUT ON PROZAC AND TRAX BY MH WHEN IN JAIL. SWITCHED TO DOXEPIN AND PROZAC HERE. DENIES DRUG PROBLEM BUT HEAVY DRINKING PRIOR TO ARREST
- MEDICAL: HTN, SEIZURE - DILANTIN
- O: ALERT, GOT AGGITATED WHEN HE FELT HE WAS NOT GETTING ENOUGH TIME, CAME WITH RECORDS THAT WERE DISORGANIZED AND MARKED UP, MOOD: IRRITABLE, NOT OVERTLY PSYCHOTIC
- A: BPAD, PTSD, ETOH DEP
IT'S NOT CLEAR THAT HE'S EVER TAKE A MED FOR BPAD
- P: DC DOXEPIN, CONTINUE 20MG PROZAC BUT CHANGE TO QHS
ADD RISPERDAL 2MG QHS - DISCUSSED RISK BM/CHOL/TD
DRAW BLOOD IN ONE MONTH - CHEM 18
SUGGEST OPMH
ENCOURAGED SUB ABUSE GROUPS
RISPERDAL 2MG TABS (RISPERIDONE)
SIG: TAKE ONE QHS
SIG:
START DATE: 01/21/14 TOTAL DAYS: 180
MD: HIGGINS, EDMUND -
FLUOXETINE 20MG (PROZAC)
SIG: TAKE ONE QHS
SIG:

SCDC# 357777 BLACKMON, ANDREW LEE

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START DATE: 01/21/14 TOTAL DAYS: 180

MD:HIGGINS, EDMUND -

SIGNED OFF ON 01/21/14 @ 12:07 BY EDMUND S HIGGINS, PSYCHIATRIST

MAR UPDATED. LAB SLIP FILLED OUT AND PLACED IN BOX.

SIGNED OFF ON 01/21/14 @ 16:16 BY JANET BRAZEL, REGISTERED NURSE I

** ENCOUNTER: 7 MENTAL HEALTH CLINIC 11/15/13 9:36 KIRKLAND COMP
MENTAL HEALTH ASSESSMENT:

D: HE IS A 43 YEAR OLD MARRIED BLACK MALE FROM CLAREDON COUNTY AND IS SERVING A 15 YEAR SENTENCE FOR BANK ROBBERY. REPORTS THIS IS HIS 1ST INCARCERATION HERE AT SCDC. REPORTS BEING DIAGNOSE WITH PTSD , BIPOLAR DISORDER, ANXIETY AND DEPRESSION. REPORTS TAKING TRAZADONE, PROZAC AND DILANTIN IN THE PAST. REPORTS HAVING A NERVOUS BREAKDOWN IN JANUARY 2013 DUE TO BEING UNDER A LOT OF STRESS. REPORTS ATTEMPTING SUICIDE BY CUTTING HIS WRIST SEVERAL YEARS AGO AND STATES "CUTS BEING SUPERFICIAL ONES". CCC ASKED, DOES HE FEEL SUICIDAL OR HOMICIDAL DENIES A/V HALLUCIANTIONS OR S/H IDEATIONS. REPORTS BEING ABUSED PYHSICALLY AND SEXUALLY AS A CHILD. REPORTS COMPLETING THE 7TH GRADE REPORTS SUFFERING WITH DEPRESSION ALOT AND BECOMING STRESS EASILY IN LIFE. ALSO, REPORTS USING WITH MARIJUANA IN THE PAST. I/M APPEARS NOT TO BE IN ACUTE DISTRESS AT THIS TIME. INMATE WAS ALERT AND ORIENTED IN ALL SPHERES. PRESENTED WITH A "OK" MOOD AND CALM AFFECT. DISPLAYED FAIR INSIGHT/JUDGEMENT. THOUGHTS WERE CLEAR AND CONCISE. GOOD EYE CONTACT.

A: DX IMPRESSION: AXIS I: DEPRESSIVE DISORDER NOS; AXIS II: NONE; AXIS III: HYPERTENSION; AXIS IV: INCARCERATION/SEPARATION FROM FAMILY; AXIS V:GAF=75.

P: CCC RECOMMENDS OUTPATIENT MENTAL HEALTH TX AND PSYCH ASSESSMENT.

SIGNED OFF ON 11/15/13 @ 9:53 BY TONIA HILL, HUMAN SERVICES COORD I

** ENCOUNTER: 6 MENTAL HEALTH CLINIC 11/13/13 14:54 KIRKLAND COMP
SIGNED OFF ON 11/13/13 @ 14:54 BY MELISSA B TURNER, REGISTERED NURSE I

** ENCOUNTER: 3 MENTAL HEALTH CLINIC 11/12/13 14:54 KIRKLAND COMP
REFERRED FOR BIPOLAR AND PTSD.

SIGNED OFF ON 11/13/13 @ 14:54 BY MELISSA B TURNER, REGISTERED NURSE I

SIGNED OFF ON 11/14/13 @ 15:12 BY CHARLES T GOODSON JR, HUMAN SERVICES COORD

***** END OF SICK CALL NOTES *****

2014

THE FOLLOWING IS THE STATEMENT OF FACTS
REQUIRED BY RULE 203(B)(IV) OF THE SOUTH CAROLINA
APPELLATE COURT RULES.

THE STATE AND DEFENDENT CONSENTED TO M. NAUGHTEN
COMPETENCY EVALUATION ON MARCH 15, 2013 THE
DEFENDENT RECEIVED THE EVALUATION ON MAY 7, 2013
ON MAY 30, 2013. SOUTH CAROLINA DEPARTMENT OF
MENTAL HEALTH RETURNED A REPORT STATING
THAT THE DEFENDENT KNEW RIGHT FROM WRONG
AT THE TIME OF THE INCIDENT AND WAS COMPETENT
TO STAND TRIAL. MR. BLACKMON CONTENDS THAT THE
MAY 7, 2013 EVALUATION WAS INCORRECT AND
ACCOMPANIED BY CONSPIRACY AND FRAUD UPON
REVIEW OF THE MAY 7, 2013 EVALUATION IT IS CLEAR
THAT THE EVALUATORS DID NOT TELL THE TRUTH ON
ALL 3 MAJOR ASPECTS OF THE EVALUATION.

THE FIRST ASPECT OF THE EVALUATION IN WHICH THE
EVALUATORS DID NOT TELL THE TRUTH IS ON Pg 7 OF 12
OF THEIR REPORT EVALUATORS REFUSE TO ACCEPT THE FACT
THAT MR. BLACKMON WAS DIAGNOSED BY PAST TREATMENT
PROVIDERS FOR BIPOLAR AND PTSD AS WELL AS BEING
TREATED BY DR. SMITH OF THE DEPARTMENT OF MENTAL
HEALTH WHILE AWAITING TRIAL AND SO CONCLUDED
THAT MR. BLACKMON DOES NOT SUFFER FROM PTSD &
BIPOLAR DISORDER

Aspect 1

THE FACT THAT MR BLACKMON WAS EVALUATED BY ONE PSYCHIATRIST EDMUND S. MCGOWAN AND DIAGNOSED WITH BIPOLAR DISORDER & PTSD AS WELL AS PSYCHIATRIST MICHAEL J FERLAUTO WHO ALSO DIAGNOSED MR BLACKMON WITH PTSD IS EVIDENCE THAT THE EVALUATORS CONCLUSION THAT MR BLACKMON DID NOT SUFFER FROM SAID MENTAL DISORDERS AT THE TIME OF THE CRIME UNTRUE INCORRECT FALSE AS WELL AS IMPOSSIBLE. THESE TWO NEW DIAGNOSISES ALSO SUPPORT THE DIAGNOSIS OF PTSD & BIPOLAR GIVEN TO ANDREW BLACKMON BY DR CYNTHIA S CARTER ON THE DATE OF DEC, 29, 2009 IT IS IMPOSSIBLE FOR FOUR PSYCHIATRIST TO EVALUATE AND DIAGNOSE MR BLACKMON WITH PTSD & BIPOLAR DISORDER AND ALL OF THEM BE WRONG COMPARED TO THE EVALUATORS DIAGNOSIS THAT MR BLACKMON DOES NOT SUFFER FROM SAID MENTAL ILLNESSES

ALSO TO PROVE THE MAY 7, 2013 EVALUATION IS FRAUDULENT ON POINTS OF CLINICAL OPINION REGARDING CAPACITY TO CONFORM CONDUCT EVALUATORS STATE THAT AT THE TIME OF THE ALLEGED OFFENSE, MR BLACKMON DID NOT LACK SUFFICIENT CAPACITY TO CONFORM HIS CONDUCT TO THE REQUIREMENTS OF THE LAW AS A RESULT OF MENTAL DISEASE OR DEFECT SPECIFICALLY

#1.

~~BOTH *COILATERAL SOURCES*~~ AND MR BLACKMON DESCRIBE HIS ACTIONS ON THE DAY OF THE ALLEGED EVENT AS DELIBERATE SELF-DIRECTED, LOGICAL, RATIONAL ORGANIZED, AND GOAL ORIENTATED IN NATURE ALTHOUGH MR BLACKMON TOLD THE EVALUATORS THE TRUTH ABOUT HIS ACTIONS AS HE REMEMBERED BE ON THE DAY OF THE EVENT MR BLACKMONS (PG 8-12 EVAL) VERSION OF THE EVENTS THAT TOOK PLACE THAT DAY ~~WERE~~ ^{WERE} INCORRECT. THE ACTIONS TOLD IN TRUTH TO THE EVALUATORS BY MR BLACKMON WERE ACTIONS THAT TOOK PLACE THE DAY BEFORE THE OFFENSE MR BLACKMON DID NOT REMEMBER WHAT HE DID THE DAY OF THE OFFENSE IT IS IMPOSSIBLE FOR A COILATERAL SOURCE TO DESCRIBE MR BLACKMONS ACTIONS ON THE DAY OF THE ALLEGED EVENT BECAUSE ~~THOSE~~ ACTIONS NEVER TOOK PLACE EVIDENCE PROVES ALL ACTIONS DESCRIBED TO EVALUATORS ONLY TOOK PLACE THE DAY BEFORE. EVALUATORS LIED

THEM TO

THE THIRD ASPECT IN WHICH THE EVALUATORS DID NOT TELL THE TRUTH IS IN THE CLINICAL OPINION REGARDING CRIMINAL RESPONSIBILITY ON PG 11 of 12 EVALUATORS STATE MR BLACKMONS SYMPTOMS HAVE BEEN DIAGNOSED BY THESE EXAMINERS AS INDICATIVE OF ANTI SOCIAL PERSONALITY DISORDER. THIS DIAGNOSES IS UNTRUE & IMPOSSIBLE DUE TO THE FACT THAT ON PG 7 OF 12 EVALUATORS ACKNOWLEDGE THAT THIS IS OFFERED AS A "RULE OUT" AS MR BLACKMON "DID NOT" ENDORSE ITEMS CONSISTENT WITH A DIAGNOSIS OF ANTI SOCIAL PERSONALITY DISORDER ON A PSYCHOLOGICAL MEASURE & THE DESCRIPTOR "RULE OUT" INDICATES THERE IS INSUFFICIENT INFORMATION TO CONCLUSIVELY OFFER DIAGNOSIS. ALSO MR BLACKMON HAS (BEEN) TREATED & EVALUATED BY FOUR PSYCHIATRIST & ONE THERAPIST AND NONE OF THEM HAS EVEN MENTIONED SAID DISORDER MR BLACKMON HAS A FAMILY HISTORY OF MENTAL ILLNESSES AND NO ONE HAS EVER BEEN DIAGNOSED WITH ANTISOCIAL PERSONALITY DISORDER. THIS IS CLEAR EVIDENCE THAT MR BLACKMON DID NOT SUFFER FROM ANTISOCIAL PERSONALITY DISORDER AT THE TIME OF THE CRIME NOR BEFORE OR AFTER

OTHER ASPECTS OF LIE'S TOLD BY EVALUATOR'S
 ON PG 11 of 12 EVALUATORS STATE THERE ARE DATA
 TO INDICATE KNOWLEDGE OF WRONGFULNESS AT THE TIME
 FOR EXAMPLE POLICE REPORTS INDICATE THAT MR
 BLACKMON AND HIS CO-DEFENDENT CHANGED THEIR
 CLOTHES AND DISCARDED THE CLOTHES THEY WERE
 WEARING. ACCORDING TO THE SAME POLICE
 REPORT CASE NUMBER 13-0286 DATE 01/30/2013
 OFFICER ERIC ROSDALE IT STATES CLEARLY THE
 MALE CHANGED CLOTHES IN THE LOBBY; THIS
 LIE TOLD BY EVALUATORS IS ALSO A PART OF
 THEIR CLINICAL OPINION REGARDING CRIMINAL
 RESPONSIBILITY

ON PG 3 of 12 Substance Abuse History
 EVALUATORS DID NOT TELL THE TRUTH WHEN THEY
 STATE WHEN ARRESTED FOR THE PRESENT CHARGE
 HE ACKNOWLEDGED USE OF MARIJUANA AND BRIEF
 EXPERIMENTATION WITH COCAINE & HEROIN
 ON PAGE 9-12 EVALUATORS STATE IN THEIR REPORT
 MR BLACKMON STATED UPON HIS ARREST I WAS
 OUT OF CONTROL... YELLING AND SCREAMING TELLING
 THEM I WANT A LAWYER. MR BLACKMON STATED THAT
 HIS UNCLE ARRIVED AND MR BLACKMON WAS TELLING
 HIM HE OWES ME MONEY. NO WHERE DID MR
 BLACKMON ACKNOWLEDGE THE USE OF DRUGS



State of South Carolina
Department of Mental Health

MENTAL HEALTH COMMISSION:

Alison Y. Evans, PsyD, Chair
Joan Moore, Vice Chair
Jane B. Jones
Everard Rutledge, PhD
J. Buxton Terry

STATE DIRECTOR

John H. Magill

King Cutter
Attorney at Law
PO Box 339,
Manning, SC 29102

May 30, 2013

Division of Inpatient Services
G. Werber Bryan Psychiatric Hospital
Forensic Evaluation and Treatment Services
7901 Farrow Road, Building #6
Columbia, SC 29203
Information: (803) 935-6586

Re: The State of South Carolina vs. Blackmon, Andrew
DMH Case #: 1026-0462
Clarendon County, Court of General Sessions

Dear Attorney Cutter:

In accordance with the court order issued by the Honorable R. Ferrell Cothran, evaluations of criminal responsibility and capacity to conform were conducted by the South Carolina Department of Mental Health (SCDMH) pursuant to S.C. Code Ann. § 17-24-10 (1976) and § 17-24-20 (1976).

Please see the attached report for the results of this evaluation.

This 13 page document is certified to be the original court-ordered evaluation report issued pursuant to S.C. Code Ann. § 17-24-10 (1976) and § 17-24-20 (1976).

5/30/13
Date

Jeffrey E. Musick, Ph.D., ABPP
Jeffrey E. Musick, Ph.D., ABPP
Chief Psychologist
Forensic Evaluation Services
Department of Mental Health

cc: Christopher Durant, Assistant Solicitor, PO Box 70, Manning, SC 29102

JM/tl

MISSION STATEMENT
To support the recovery of people with mental illnesses.



JEM



State of South Carolina
Department of Mental Health
April 23, 2013

MENTAL HEALTH COMMISSION:

Alison Y. Evans, PsyD, Chair
Joan Moore, Vice Chair
Jane B. Jones
Everard Rutledge, PhD
J. Buxton Terry

STATE DIRECTOR
John H. Magill

Dear Attorney King Cutter:

Division of Inpatient Services
G. Werber Bryan Psychiatric Hospital
Forensic Evaluation and Treatment Services
7901 Farrow Road, Building #6
Columbia, SC 29203
Information: (803) 935-6586

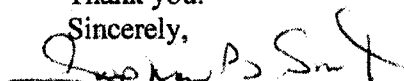
The court ordered evaluation for **Andrew Blackmon** (DOB: 09-16-1970) is scheduled for **Tuesday, May 7, 2013 @ 8:30 AM** at the (DMH) Forensic Evaluation Service, Craft-Farrow Psychiatric Hospital, Building #6. Competence to stand trial evaluations may include questions about potential evidence and limited discussion of the alleged offense(s). Criminal responsibility evaluations may include extensive discussion of the alleged offense(s). Consequently, some defendants decline to participate before consulting with their attorney or ask that their attorney attend the evaluation. Therefore, we ask that you speak with your client prior to this appointment to advise him or her as of what to expect and how to proceed.

Because DMH does not communicate with defendants regarding scheduling or provide transportation for them, you must see that your client is present for the evaluation, whether they are in detention or the community. In doing so, please do not forward this letter directly to your client or their family. If the defendant is transported by law enforcement personnel, the transport officer must remain in the building until the evaluation is complete.

Due to security concerns and space constraints, we ask you to limit the number of persons accompanying defendants to the evaluation. Contact our office in advance should you require special accommodations.

Finally, if you have any information that may be relevant to this defendant's past or current mental health, which you have not yet discussed with us or forwarded to us, please do so immediately. Our telephone number is (803) 935-5600. Our fax number is (803)-935-5544.

Thank you.
Sincerely,


Sophia B. Smith, AA

cc: Christopher Durant, Sol.
Clarendon Co. Det. Ctr., Transport Div., Sgt. Felder

MISSION STATEMENT

To support the recovery of people with mental illnesses.



**SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH
FORENSIC EVALUATION SERVICE**

CRIMINAL RESPONSIBILITY/CAPACITY TO CONFORM CONDUCT EVALUATION

Name: BLACKMON, Andrew Lee

Date of Birth: 09/16/70 (age: 42 years)

Date of Evaluation: 05/07/13

Evaluators: Marla L. Domino, Ph.D. (presiding)
Dawn Whetstone, LISW-CP

Identifying & Referral Data: Andrew Lee Blackmon was ordered by the Clarendon County Court of General Sessions to undergo an evaluation of his criminal responsibility and, if opined responsible pursuant to § 17-24-10 (A), capacity to conform his conduct to the requirements of the law, pursuant to § 17-24-20 (A) because of a *“Diagnosis with Manic Bipolar Disorder [sic] and not taking medication.”* According to that court order, Mr. Blackmon is currently charged with Entering a Bank with Intent to Steal which allegedly occurred on or about 01/25/13. He is waiting adjudication at the Clarendon County Detention Center.

Sources of Information:

1. Interview with Mr. Blackmon on 05/07/13 for approximately 1 hour 30 minutes.
2. Psychological testing with Mr. Blackmon on 05/07/13.
3. State of South Carolina, County of Clarendon, Order for Criminal Responsibility and Capacity to Conform Evaluation (M’Naughten), received 03/25/13.
4. Review of Mr. Blackmon’s current South Carolina Department of Mental Health (SCDMH) Forensic Evaluation Service outpatient chart, including a Psychiatric Social Work Admission Assessment conducted by Dawn Whetstone, LISW-CP, with an acquaintance of Mr. Blackmon’s.
5. Information pertaining to Mr. Blackmon’s current charge including:
 - a. Arrest Warrant 2013A1420100014

- b. Incident Report, Supplemental Incident Report, Property Listing, and Investigative Notes (case#13-0286)
6. Clarendon County Detention Center records (dated 01/25/13 – 04/23/13, one document not dated).
 7. Clarendon Health System records (dated 06/08/12, 07/30/12, and 09/05/12).
 8. Clarendon Memorial Hospital records (not readable due to poor copy).
 9. Santee-Wateree Mental Health Center records (dated 02/07/13 – 04/16/13).
 10. Telephone contact with Christina Blanding and Stacy McInnis of the Bank of Clarendon (05/29/13).

Efforts to contact Detective Eric Rosdail of the Manning Police Department were unsuccessful. Records from the May Institute (West Roxbury, Massachusetts) were requested but not received. Staff from the Roxbury Comprehensive Community Health Center left a message for the undersigned on 05/30/13 indicating that their facility is closing and all records are boxed up (and, therefore, inaccessible) to be transported for storage.

Notification: At the outset of this evaluation, Mr. Blackmon was notified of these examiners' role, the purpose of this evaluation, and the limits on confidentiality. Upon inquiry, he noted this evaluation was ordered by "the judge" to "see whether or not – how I was acting around the time." He noted the resulting report would be sent to "my lawyer – maybe to the solicitor [and] the judge." He recalled that these examiners were on "nobody's" side. He indicated a willingness to proceed.

Personal History:

Family and Social History

According to Mr. Blackmon, he was born in Boston, Massachusetts (MA), and raised in the same by his biological mother. He described his childhood as "violent" and reported physical abuse by family members and peers. He also noted that he was "raped" by an older female cousin as a child.

Education History

Mr. Blackmon terminated his formal education during the 7th grade to avoid gang-related violence. Per his report, he then worked at a fast food restaurant. Mr. Blackmon described

Psychiatric History (per Mr. Blackmon's report)

According to Mr. Blackmon, he first sought psychiatric services in his mid-30s at the behest of his mother who expressed concern regarding his lifestyle (e.g., numerous sexual partners, engagement in "dog fighting"); Mr. Blackmon denied that he was experiencing symptoms of a mental illness at that time. To appease his mother, however, he engaged in outpatient treatment at a facility in Roxbury, MA, for eight or nine months to include prescriptions of Trazodone (mood stabilizer) and Prozac (antidepressant), and reportedly his symptoms were diagnosed as indicative of bipolar disorder, PTSD, and anxiety, per Mr. Blackmon's report; those records (from Roxbury Comprehensive Community Health Center) were inaccessible as noted below. Mr. Blackmon said he sought outpatient treatment a year later at an unknown facility in Malden, MA, but "the lady said I'd have to stop drinking and I never went back." When asked why he sought psychiatric treatment at that time, Mr. Blackmon was unable to provide an explanation other than to note that his former therapist (at Roxbury Comprehensive Community Health Center) "told me how much I needed treated." Mr. Blackmon did not describe symptoms suggestive of significant depression, mania or psychosis (e.g., hearing voices). He did admit to one suicidal gesture in the context of excessive alcohol consumption.

Psychiatric History (per collateral sources)

Staff from the Roxbury Comprehensive Community Health Center left a message for the undersigned on 05/30/13 indicating that their facility is closing and all records are boxed up (and, therefore, inaccessible) to be transported for storage. However, they did state that Mr. Blackmon's case was closed in 2010.

Clarendon Health System (dated 06/08/12) records indicate that during an appointment in June 2012, Mr. Blackmon "claims to have PTSD due to fighting in a gang in Boston and all the killings, beatings he has seen." At that time, he endorsed anxiety, sleep disturbance, and anxiety; it was noted that Mr. Blackmon admitted to drinking alcohol the morning of that appointment due to nervousness around doctors. He was referred to psychiatry although there is no indication in those records that he was ever seen.

Clarendon County Detention Center records indicate that Mr. Blackmon reported a history of psychiatric treatment (to include psychotropic medication prescription), past diagnoses of bipolar disorder and PTSD, one past suicidal gesture in which he attempted to cut his wrist, and abuse of alcohol. An appointment with mental health was scheduled for 01/28/13, although on

02/21/13 it was noted that no such referral was necessary. In addition to medications for seizures, since the beginning of February 2013, Mr. Blackmon has been prescribed Prozac (antidepressant) and Trazodone (mood stabilizer). Also at the beginning of February 2013, diagnoses of "psychosis" and epilepsy were given; in April 2013, diagnoses of "seizures" and bipolar disorder were listed. Jail records also report several disciplinary responses for minor infractions (e.g., bed not made).

Records from Santee-Wateree Mental Health Center indicate Mr. Blackmon has been seen by facility staff since 02/07/13, while incarcerated. At that time it is noted that "Today at least even [though] no meds in 10 [months] is not hypomanic or even [significantly] depressed." It is likewise noted that Mr. Blackmon "does not appear to be as significantly depressed by affect [observed emotional expression] as he describes subjectively." Those records indicate Mr. Blackmon reported a history of diagnoses of bipolar disorder and PTSD, nightmares, anxiety, and hearing "voices"; Mr. Blackmon presented with a letter from Roxbury Comprehensive Community Health Center ("Roxcomp") dated 12/29/09 which indicated a diagnosis of bipolar I disorder. However, it is noted in Santee-Wateree Mental Health Center records that, despite that diagnosis, the clinician did "not so far get that history from him, [especially] considering heavy alcohol use and no meds over three years until recently." The clinician reviewed additional records from that facility and noted a variety of past diagnoses (e.g., PTSD, mood disorder not otherwise specified), noting that "malingering was always a consideration"; it appears that a diagnosis of PTSD was the most consistent diagnosis given to Mr. Blackmon at that facility (per the clinician) with supporting data of multiple losses and chronic irritability and anger. The clinician also indicated that Mr. Blackmon has reported poor sleep during his present incarceration but jail staff say they have not observed this. It was noted that no psychotic symptoms were reported or observed. His symptoms were diagnosed as indicative of mood disorder, not otherwise specified, and alcohol abuse.

According to a friend of Mr. Blackmon's, to evaluator Ms. Whetstone, Mr. Blackmon often has difficulty staying still and focusing, his "talk is not normal and doesn't make sense," and he has voiced some hyperreligious beliefs (e.g., that he is closer to God than anyone else, God came and spoke to him in jail, "sees visions of God talking to him"). She noted that he sometimes isolates himself and is non-verbal, tearful, and sad especially regarding his mother's death.

Current Mental Status: A mental status examination performed today revealed a 42-year-old, African-American male who presented with adequate, personal hygiene and clean attire. No auditory, visual, or motor abnormalities were noted. He exhibited good eye contact and his use of mannerisms and gestures was within normal limits. He was cooperative with the evaluation and polite at all times.

* Mr. Blackmon did not exhibit significant deficits in his memory, attention, concentration, fund of knowledge, or abstract thinking. He correctly identified the date, day of the week, location, approximate time, and situation. Mr. Blackmon's speech was clear, of normal volume, and of average rate. He presented with goal-directed, linear thinking.

8 of 12
DEFENDENTS ACCOUNT OF ALLEGED EVENTS

When asked, Mr. Blackmon described his current mood as "pretty good" and his typical mood as "all over the place - sad, very very sad, happy, angry, depressed." He denied current thoughts of wanting to hurt himself or others. Mr. Blackmon reported adequate relationships with jail staff and peers although stated, "one C.O. doesn't know how to handle the mentally disabled," referring to a seizure disorder. He noted his sleep to be "horrible" but described adequate energy and appetite. During today's exam, Mr. Blackmon's affect [observed emotional expression] appeared consistent and within normal limits. He denied current symptoms of significant mood disturbance (e.g., depression) or psychosis (e.g., hearing voices) and no overt signs of such were observed. He reported current prescription of Prozac (antidepressant), Dilantin (for seizures), Lamictal (for seizures), and Trazodone (for sleep).

Psychological Testing: During today's exam, Mr. Blackmon completed a published, standardized self-report questionnaire of personality traits and psychiatric symptoms. Its validity scales indicated he presented with mild exaggeration of his psychiatric problems such that his resulting profile should be interpreted with caution. Mr. Blackmon's profile resulted in five of eleven scales in the clinically significant range indicating he chose to present himself as someone with numerous somatic complaints, who has experienced trauma-related stress, who is overly hostile and suspicious, who has identity problems and a poor ability to maintain relationships, and who is dependent on alcohol.

Diagnostic Impressions: Based on the available data, it appears Mr. Blackmon's symptoms are best characterized by a diagnosis of (rule out) antisocial personality disorder. Antisocial personality disorder describes an individual with a pervasive pattern of disregard for, and

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violation of, the rights of others, in addition to a variety of concomitant behaviors (e.g., activities that are grounds for arrest, consistent irresponsibility) and/or personality traits (e.g., lack of remorse, aggressiveness). Individuals whose symptoms are diagnosed with antisocial personality disorder must also evidence symptoms of conduct disorder (e.g., aggression towards people or animals, destroying property, deceitfulness, theft, significant rule violation) before the age of 15 years. This diagnosis is based on symptoms indicative of conduct disorder since at least his early teens, in addition to significant disregard for and violation of the rights of others, engagement in illegal activities, impulsivity and failure to plan, irritability and aggressiveness, disregard for the safety of others, and consistent irresponsibility during his adulthood. This is offered as a "rule out" as Mr. Blackmon did not endorse items consistent with a diagnosis of antisocial personality disorder on a psychological measure (see above). The descriptor, "rule out," indicates there is insufficient information to conclusively offer a diagnosis, although available data suggest a disorder should be considered.

As noted above, Mr. Blackmon's symptoms have been diagnosed as indicative of PTSD and/or a mood disorder (e.g., bipolar disorder) by past treatment providers. However, he did not endorse sufficient symptoms to meet criteria for a diagnosis of PTSD and there is no documentation (e.g., in jail records) of observation of symptoms suggestive of PTSD. In addition, Mr. Blackmon denied symptoms suggestive of mania, which is required for a diagnosis of bipolar disorder. While he described a history of depressive symptoms, these did not appear consistent with the frequency and severity needed to diagnose a mood disorder, but rather appeared to be the consequence of excessive alcohol consumption and poor coping skills. To this effect, a diagnosis of alcohol dependence, in a controlled environment, is warranted. The "in a controlled environment" descriptor indicates that Mr. Blackmon theoretically does not have access to these substances secondary to his current incarceration.

Information Relevant to Criminal Responsibility and Capacity to Conform

Conduct:

Police Account of Alleged Events

pg 8-12 dependent account of events

According to police incident reports, on 01/25/13 at approximately 8:50am, Mr. Blackmon entered the Bank of Clarendon and gave a hand-written note a teller [Christina Blanding] that demanded money. He reportedly also told the teller, "Give me all the money, make no fast moves or push any buttons." Per the teller, she looked at him like he was "joking" and he

JEM

responded, "I am not playing" and patted his front pants pocket. The teller then gave him money and he told her to stop at some point. Mr. Blackmon then left the bank.

Police later determined that, prior to entering the bank, according to South Carolina Department of Social Services (DSS) staff, Mr. Blackmon's co-defendant, Virginia Blackmon, had borrowed a pen and paper from them. After the alleged robbery, the couple reportedly reentered the DSS building and changed clothes. Police records indicate that a search of a nearby dumpster revealed the clothes Mr. Blackmon was wearing during the alleged incident.

According to Mr. Jerry Kelley, after leaving the bank, Mr. Blackmon and his co-defendant called paid him \$20 for a ride. Per police reports, they returned to the Manning Motel to retrieve a bag of clothes they left there earlier in the day, and the hotel's manager called 911. Police arrived shortly thereafter and arrested both suspects; at that time, Ms. Blackmon admitted to writing the note which was found in Mr. Blackmon's back pocket. It was later determined that the couple used some of the stolen money to buy a phone at Wal-Mart. Per police reports, \$2410 was eventually recovered. An incident report indicates Mr. Blackmon appeared under the influence of alcohol when arrested.

Defendant's Account of Alleged Events 12 of 12

According to Mr. Blackmon, on the morning of the alleged offense, he and his wife woke up at an unknown time; he described his mood as "fine" at that time. Mr. Blackmon stated he then consumed a "tall can of beer." At some point, they left their house to walk from Alcolu to Manning. They rested at a hotel on the way to Manning, obtaining permission from the hotel's manager to leave their bag there. As some point along the way, Mr. Blackmon stated he procured a pint of gin. Upon their arrival to Manning, they went to visit a friend who had recently opened a restaurant; when informed their friend was not there, they walked down the street to a clothing store. Mr. Blackmon stated his wife called their friend and told him of their location; Mr. Blackmon stated he went inside the clothing store while his wife spoke to their friend. Upon leaving the clothing store, Mr. Blackmon suggested to his wife that they get a copy of his criminal record from the Sherriff's office, as a background check was needed for an application they were intending to complete for housing in Sumter. Mr. Blackmon stated that when he went into the Sherriff's office, he saw another office marked "DMH" (the South Carolina Department of Mental Health) and asked his wife to make an appointment for him, which she reportedly did while he waited for a copy of his criminal record.

JEM

Mr. Blackmon stated they then began to walk home, at which point, per Mr. Blackmon, "I was drinking and smoking." He stated he then told his wife to write on a piece of paper "Don't push any buttons. Don't make any fast moves." Mr. Blackmon stated he had "no idea" why he would ask her to write such a note and he reportedly did not recall where his wife obtained the writing materials. Per his report, his wife did as he instructed and he took the note out of her hand and walked into the bank. He reported having "no feelings" at the time. He denied speaking to the teller, as is indicated in police reports. He stated that the teller or police "lied" about him patting his pants, as the teller reported. Mr. Blackmon provided a detailed account of his behavior from that point forward. He did not describe experience with significant symptoms of a mental illness during the time in question.

Mr. Blackmon stated that upon leaving the bank, he and his wife walked across the street to the DSS building "to take off my hat and coat" and then placed them in the dumpster in front of the DSS building; he provided an explanation for why he did that. He denied taking off his pants, as is suggested in police reports. Mr. Blackmon then walked to a nearby store and bought a six-pack of beer and cigarettes. Mr. Blackmon stated he offered a man near the store \$20 to drive them to a Ramada Inn and asked one of the other passengers to rent him a room. Mr. Blackmon stated that once he and his wife went into their hotel room, they drank beer and watched TV. At some point, per Mr. Blackmon, his wife left and returned with a new cell phone. Mr. Blackmon stated he informed his wife that they needed to return home, but first had to stop at another motel to retrieve their bag. Ms. X reportedly called a friend who picked the couple up and dropped them off at the motel; Mr. Blackmon stated they were arrested shortly thereafter. Mr. Blackmon stated that upon his arrest, "I was so out of control ... yelling and screaming. Telling them I want a lawyer." Mr. Blackmon stated that his uncle arrived at the scene and he [Mr. Blackmon] was "telling him he owes me money."

Mr. Blackmon denied being intoxicated at the time, noting, "I was tipsy." He denied using illegal drugs at the time. He reported compliance with seizure medication. Mr. Blackmon reported that he has consumed alcohol with his seizure medication in the past, with no adverse consequences. However, he did report one instance in which he was drinking (in the absence of prescription medication), obtained a knife, and called his mother to express suicidal intention; Mr. Blackmon stated he broke into a building, then returned home and made superficial cuts on his wrists at that time.

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Mr. Blackmon reported several stressors in the weeks preceding the alleged offense including the death of a close friend and learning of a possible murder charge against his son. He described getting along well with his wife at the time and described his living accommodations in positive terms.

Collateral Information of Alleged Events

Clarendon County Detention Center records indicate that on the day of the alleged offense, Mr. Blackmon appeared under the influence of alcohol; no other observations of psychiatric symptoms were noted. An appointment to see mental health was made for 01/28/13, although it does not appear that he was seen at that time. At the beginning of February 2013, Mr. Blackmon was prescribed Prozac and Trazodone, and his symptoms were diagnosed as indicative of "psychosis" and bipolar disorder although there is minimal evidence contained in records for support of either diagnosis.

Santee-Wateree Mental Health Center records indicate Mr. Blackmon was first seen almost two weeks after the alleged offense, on 02/07/13. At that time, he reported being off psychotropic medications since he came to South Carolina, about 10 months ago. Regarding the alleged offense, Mr. Blackmon informed the clinician (per mental health center records):

I don't know why I went in that bank ... he does not know why he did this [because] he and girlfriend are on disability and had money. Was drinking at the time. Says remembers writing the note, going into the bank ... Before went to bank had been getting more depressed and anxious, not sleeping, having some voices; using alcohol to calm himself.

At the time of that appointment (02/07/13), Mr. Blackmon reported feeling "depressed, anxious, not sleeping and having nightmares" however it is noted that "Today at least even [though] no meds in 10 [months] is not hypomanic or even [significantly] depressed." His symptoms were diagnosed as indicative of mood disorder, not otherwise specified, and alcohol abuse and he was prescribed Prozac (antidepressant) and Trazodone (for sleep).

During an appointment with Santee-Wateree Mental Health Center staff on 04/16/13 it is noted that:

Once in the office he tells me that he wanted to ask me why he did what he did in robbing the bank. He says he remembers asking his wife to write a note saying to give him money. He remembers giving the note to the bank teller. However he says he did not

plan to rob the bank, cannot imagine why he would try to rob the bank because he and wife are on disability, had money, had no reason to rob a bank. Does say he was drinking that day, wonders if the alcohol interacted [with] his Lamictal. Says only similar episode was a few yrs ago when he called his [mother] to say he was going to kill himself ... cannot imagine why he would have done that as he was not depressed ... as he was leaving, he asked if I could write a statment [*sic*] about my findings today and send it to his lawyer. I told him his attorney could ask for our records.

Telephone contact was made with Ms. Christina Blanding, the teller in the alleged offense, and Mr. Stacy McInnis, her supervisor, of the Bank of Clarendon, on 05/29/13. They requested a copy of the court order pertaining to the present exam which was sent; however, Ms. Blanding did not call back. Efforts to contact Detective Eric Rosdail of the Manning Police Department were unsuccessful.

Clinical Opinion Regarding Criminal Responsibility:

Pursuant to S.C. Code Ann. § 17-24-10 (A), "*It is an affirmative defense to a prosecution for a crime that, at the time of the commission of the act constituting the offense, the defendant, as a result of mental disease or defect, lacked the capacity to distinguish moral or legal right from moral or legal wrong or to recognize the particular act charged as morally or legally wrong.*"

Based on available data, it appears Mr. Blackmon did not lack the capacity to distinguish moral or legal right from moral or legal wrong or to recognize the particular act charged as morally or legally wrong, as the result of a mental disease or defect, at the time of the alleged offense. Although ~~Mr.~~ Blackmon's symptoms have been diagnosed by these examiners as indicative of (rule out) antisocial personality disorder, ~~none~~ of the associated symptoms are related to his capacity to distinguish right from wrong at the time of the alleged offense. Moreover, should the court determine that Mr. Blackmon committed the offense as alleged, there are data to indicate knowledge of wrongfulness at that time. For example, police reports indicate that Mr. Blackmon and his co-defendant changed their clothes and discarded the clothes they were wearing during the incident in a nearby dumpster; these actions indicate an attempt to evade detection and thus suggest knowledge of wrongfulness.

Available information indicates that Mr. Blackmon may have been intoxicated with alcohol during the time of the alleged offense. Use of and intoxication from alcohol can lead to changes

PS
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in mood and behavior as well as impaired judgment and decision-making. However, voluntary alcohol use/intoxication cannot be used to support a defense of insanity.

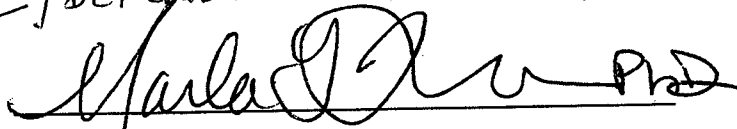
Clinical Opinion Regarding Capacity to Conform Conduct:

Pursuant to S.C. Code Ann. § 17-24-20, "a defendant is guilty but mentally ill if, at the time of the commission of the act constituting the offense, he had the capacity to distinguish right from wrong or to recognize his act as being wrong as defined in Section 17-24-10(A), but because of mental disease or defect he lacked sufficient capacity to conform his conduct to the requirements of the law."

The available data suggest that, at the time of the alleged offense, Mr. Blackmon did not lack sufficient capacity to conform his conduct to the requirements of the law, as a result of mental disease or defect. Specifically, both collateral sources and Mr. Blackmon describe his actions on the day of the alleged event as deliberate, self-directed, logical, rational, organized, and goal-oriented in nature. While his symptoms appear consistent with a diagnosis of (rule out) antisocial personality disorder, his behavior did not appear to be directly influenced by or a direct manifestation of symptoms of a significant mental illness.

As noted, available information indicates that Mr. Blackmon may have been intoxicated with alcohol during the time of the alleged offense; if true, this could have impacted his mood and/or behavior at the time, as well as impaired his judgment and decision-making.

DEPENDANTS ACCOUNTS OF ALLEGED EVENTS 8 of 12


Marla L. Domino, Ph.D.

Licensed Clinical Psychologist

05/30/13
Date



Notes: Upon conducting a search of the area Chief Shaffer enter the DSS building on Church Street to ask if anyone he seen the suspects. A DSS worker informed Chief Shaffer that the couple had come in and the female had borrow a piece of paper and a pen to write the note used in the bank robbery. The couple had also come in after the robbery and the male had changed clothes in the lobby. Upon checking the area further the blue coat worn by Blackmon during the robbery was found hanging over the dumpster fence at T's Express at the corner of Church and Boyc streets and the pants, camouflage bandanna, and black jeans were found in a clear plastic bag hanging on the inside of the same fence near the dumpster at T's Express. These items were recovered by Manning Police and in evidence.

NOT MR BLACKMONS

MR BLACKMON DID NOT = EVALUATORS REPORT WE NOT CHANGED CLOTHES NO DID NOT Remember

↓
Pg 11 OF 12
YELLOW HIGH
LIGHT

COPY

MANNING POLICE DEPARTMENT
INCIDENT REPORT

CASE NUMBER

1 3 - 0 2 8 6

NCIC

INQ. ENTD.

INCIDENT TYPE				COMPLETED	FORCED ENTRY	PREMISE TYPE	UNITS ENTERED	TYPE VICTIM
1. 120 - ROBBERY				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	02		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Financial Inst. <input type="checkbox"/> Government <input type="checkbox"/> Relig. Orgn. <input type="checkbox"/> Soc./Public <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Police Off.
2.				<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO			
3.				<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO			

INCIDENT LOCATION (SUBDIVISION, APARTMENT AND NUMBER, STREET NAME AND NUMBER)
106 SOUTH BROOKS ST. THE BANK OF CLARENDON, MANNING SC

ZIP CODE: 29102 WEAPON TYPE: 99

INCIDENT DATE	24 HR. CLOCK	TO	DATE	24 HR. CLOCK	DISPATCH DATE/TIME 24 HR. CLOCK			LOCATION NO.
01/25/2013	0850		01/25/2013	0900	DISP. DATE	DISP. TIME	TIME ARRIVED	DEPART. TIME
					01/25/2013	0850	0851	1100

COMPLAINANT'S NAME (LAST, FIRST, MIDDLE): BLANDING, CHRISTINA

RELATIONSHIP TO SUBJECT: #1 AQ #2 AQ #3

RESIDENT: OSOU RACE: B SEX: F AGE: 00 ETH: N

DAYTIME PHONE: (803) 433-4451 H EVENING PHONE: B

ADDRESS: 106 S BROOKS ST (BANK OF CLARENDON) CITY: MANNING STATE: SC ZIP CODE: 29102 LOCATION NO.: 03

VICTIM'S NAME (LAST, FIRST, MIDDLE): BLANDING, CHRISTINA

RELATIONSHIP TO SUBJECT: #1 AQ #2 AQ #3

RESIDENT: OSOU RACE: B SEX: F AGE: 35 ETH: N

DAYTIME PHONE: (803) 433-4451 H EVENING PHONE: B

HEIGHT: 5-6 WEIGHT: 120 HAIR: BLK EYES: BRO

FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.

ADDRESS: 106 S BROOKS ST (BANK OF CLARENDON) CITY: MANNING STATE: SC ZIP CODE: 29102 LOCATION NO.: 03

VISIBLE INJURY (VICT. 1) YES NO EXPLAIN -

VICTIM (NO. 1) USING: ALCOHOL: YES NO UNK. DRUGS: YES NO UNK.

TWO-MAN VEH. ONE-MAN VEH. DETECTIVE/SPLASMT. OTHER ALONE ASSISTED J - This Jurisdiction S - State O - Out of State U - Unknown

SUSPECT: SUSPECT RUNAWAY WANTED ARREST JAIL SUMMONS

SUBJECT NAME (LAST, FIRST, MIDDLE): BLACKMON, ANDREW LEE

RACE: B SEX: M AGE: 42 ETH: N DATE OF BIRTH: 09/16/1970 HEIGHT: 5-8 WEIGHT: 160 HAIR: BLK EYES: BRO

FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.

ADDRESS: 5326 HWY 301 #2 CITY: ALCOLU STATE: SC ZIP CODE: 29001 LOCATION NO.:

SUBJECT (NO. 1) USING: ALCOHOL: YES NO UNK. ARRESTED NEAR OFFENSE SCENE: YES NO DATE/TIME OF OFFENSE: 01/25/2013 * 0850 * DATE/TIME OF ARREST:

DRUGS: YES NO UNK. TYPE: TOTAL # ARRESTED: 0

Offenses: ROBBERY

impossible for collateral sources to describe my actions on the day of event

ON THE DATE AND TIME INDICATED ON THIS REPORT MANNING UNITS WERE CALLED TO THE BANK OF CLARENDON LOCATED AT 106 S. MILL STREET IN REFERENCE TO A TELLER BEING THREATENED. UPON ARRIVAL MANNING UNITS WERE MET BY BANK OFFICIALS WHO STATED THAT A B/M LATER IDENTIFIED AS ANDREW BLACKMON HAD ENTERED THE BANK AND HAD GIVEN A NOTE TO TELLER CHRISTINA BLANDING DEMANDING MONEY. UPON SPEAKING WITH THE MS. BLANDING SHE STATED THAT A B/M SHE THOUGHT TO BE NAMED KEITH HAD CAME TO HER WINDOW AND HAD GIVEN HER A NOT STATING "GIVE ME ALL THE MONEY, MAKE NO FAST MOVES OR PUSH ANY BUTTONS". MS. BLANDING STATED THAT SHE LOOKED AT MR. BLACKMON AS IF HE WAS JOKING AND MR. BLACKMON STATED "I AM NOT PLAYING" AND PATTED HIS FRONT PANTS POCKET. MS. BLANDING GAVE MR. BLACKMON A STACK OF \$10'S AND \$20'S FROM HER DRAWER AND MR. BLACKMON TOLD HER TO STOP. MR. BLACKMON TURNED TO LEAVE AND THEN TURNED BACK AROUND AND RETRIEVED THE NOTE AND TOOK IT WITH HIM AND FLED THE BANK. BANK OFFICIALS PULLED THE VIDEO OF THE INCIDENT AND WERE ABLE TO IDENTIFY THE INDIVIDUAL AS ANDREW LEE BLACKMON ALONG WITH PROVIDING AN ADDRESS AND PHONE NUMBER FROM HIS ACCOUNT INFORMATION AT THE BANK. MANNING UNITS ALONG WITH CLARENDON DEPUTIES CONDUCTED A SEARCH OF THE AREA BUT WERE UNABLE TO LOCATE MR. BLACKMON.

COMPARE TO BANK TELLERS WRITTEN STATEMENT

YELLOW HIGHLIGHTS

850 AM

0-12

DOCUMENTS AVAILABLE

P TYPE (GROUP)		20-Money	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY		JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY	
R	Burned					TOTAL VALUE
O	Count/Forged					
P	Dest./Damaged					
E	Recovered	2555.00				
R	Seized					2555.00
T	Stolen	2770.00				
Y	Unknown					2770.00

SUBJECT IDENTIFIED		SUBJECT LOCATED		<input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> ADM. CLOSED	<input type="checkbox"/> ARRESTED UNDER 18	<input type="checkbox"/> EX-CLEAR UNDER 18
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> UNFOUNDED	<input type="checkbox"/> UNFOUNDED	<input type="checkbox"/> ARRESTED 18 AND OVER	<input type="checkbox"/> EX-CLEAR 18 AND OVER	

REASON FOR EXCEPTIONAL CLEARANCE: 1. OFFENDER DEATH 2. NO PROSECUTION 3. EXTRADITION DENIED 4. VICTIM DECLINES COOPERATION 5. JUVENILE - NO CUSTODY

REPORTING OFFICER(S)	DATE	UNIT NUMBER	APPROVING OFFICER	DATE	UNIT NUMBER
DET. SGT ERIC ROSDAIL	01/25/2013				

MAJOR DOUGLAS A RIDGEWAY	01/25/2013	FOLLOW-UP INVESTIGATION OFFICER	
		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DET. SGT ERIC ROSDAIL
			01/25/2013

VIRGINIA Blackmon
5326 Hwy 301
Aicola, SC
29001

COLUMBIA SC 290

04 NOV 2013 PM 11



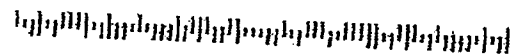
Mr. Sack D. Howie Jr.
141 North MAIN St.
Sumter, SC
29151

RECEIVED

NOV 06 2013

BY: SG

29150496541



This letter will serve as notice to Mr. Jack D. Howie Jr. and the Public Defenders Office that Mr. Andrew L. Blackmon & Mrs. Virginia I. Blackmon both hear by request relieve of their legal counsel on Lewis King Cutter Public Defender for Andrew L. Blackmon and one Scott Robinson Public Defender for Virginia I. Blackmon. The reason for this urgent request is based on the fact that upon review of Mr. & Mrs. Blackmon's discovery and disclosure of evidence that it is clear that information was entered into legal documentation. This false information was then submitted to the solicitors office as credible evidence against Mr. & Mrs. Blackmon. Mr. & Mrs. Blackmon have every reason to believe that a very large and serious conspiracy to falsely convict Mr. & Mrs. Blackmon is now in progress. It has come to Mr. & Mrs. Blackmon's attention that both Public Defenders being Scott Robinson and Lewis King Cutter are aware of false information the solicitors office has submitted as credible evidence but fail to respond in any way at all to defend Mr. & Mrs. Blackmon, Both Mr. & Mrs. Blackmon reserve the right to withhold any further information in regards to our case, do to the fact that there are litigating circumstances which involve all parties involved in Mr. & Mrs. Blackmon's case.

Please be advised that Mr. & Mrs. Blackmon will also submit this letter of request or motion to relieve of Counsel to the South Carolina Disciplinary Counsel in which Mr. & Mrs. Blackmon forward to Ericka M. Williams: Asst. Disciplinary Counsel. This letter requires a written response from all Party's who have served notice by this letter and the info contained in it. All Party's who are served with this notice and fail to respond as requested or and comply will themselves be considered a conspirator in the attempt to falsly convict Mr. & Mrs. Blackmon.

Truthfully

Mr. Andrew Lee Blackmon
Mrs. Virginia Irene Blackmon

I Virginia Blackman hereby swear that the following facts are true. On 5/25/2013 Andrew Blackman did not knowingly & willingly commit the crime he was forced to plead to. It is a known fact that Andrew Blackman suffered from one nervous breakdown while suffering from multiple mental illnesses of which he had no medication. For these facts were known by Mr. Blackman's Public Defender as well as mine but was never addressed in his court proceedings. I Virginia Blackman was Mr. Blackman's care taker & payee for his SSI benefits and did not fully recognize Mr. Blackman's poor state of mental health. Only now do I realize that my husband Mr. Blackman truly needs therapy & medication to help him deal with all the depressing issues that he has gone through, such as his mother dying in his hands which he never completely was able to accept. Along with multiple other family members he deeply loved passing away. My husband Mr. Andrew Lee Blackman is truly a wonderful & loving person who has been through more than enough heart ache & pain and does not deserve to be imprisoned for something that he had absolutely no control over. As his wife care provider & payee & best friend I'm sorry I failed to help him when he needed me most. Mr. Blackman and myself are no longer together as a married couple because of all this but he has assured

me that we can remain Friends and has
forgiven me for my mistakes & neglect in
now past relationship.

Sincerely Your
Best Friend,
[Signature]

April 3, 1972

SS#

LEGAL MAIL
MAIL ROOM

WITH THE COURT HAVING DETERMINED
THAT THE SECTION 4244 EXAMINATION WAS
ERRONEOUS WE MUST ADDRESS OURSELVES
THE PROPER REMEDY. IN DUSKY -V- US SUPRA
THE SUPREME COURT CONCLUDED THAT THE
ONLY EFFECTIVE WAY TO CORRECT AN
ERRONEOUS SECTION 4244 DETERMINATION OF
COMPETENCY WAS TO REVERSE THE CONVICTION
AND REMAND TO THE DISTRICT COURT FOR
A COMPETENCY HEARING AND NEW TRIAL IF
THE ACCUSED IS FOUND COMPETENT

ACCORD MEADAR -V- US 332 F2D 935 9TH CIR
1964

LEGAL MAIL
MAIL ROOM

THRESHOLD ISSUE IN ANY
CASE IS WHETHER ACCUSED IS MENTALLY
COMPETENT TO WAIVE HIS CONSTITUTIONAL
RIGHTS AND PLEAD TO CHARGE OR STAND
TRIAL THAT IS COMPETENT TO UNDERSTAND
NATURE OF PROCEEDINGS AGAINST HIM
AND RATIONALLY CONSULT WITH HIS
LAWYER TO PREPARE HIS DEFENSE

WOICOTT-V-US C.A.10 (KAN) 1969 407 F2d 1149
CERTIORARI DENIED 90SCT 156 396 US 879 24 LED
20137

PLEASE SEE MOTION FOR CONTINUANCE
5.6.7.8.

LEGAL MAIL

MAIL ROOM

INDIVIDUAL CANNOT BE PROSECUTED

ON CRIMINAL CHARGES UNLESS HE IS

COMPETENT TO STAND TRIAL. HE IS GENERALLY

CONSIDERED TO BE INCOMPETENT IF HE IS

UNABLE TO UNDERSTAND THE NATURE AND

CONSEQUENCES OF THE PROCEEDINGS AGAINST

HIM OR PROPERLY ASSIST IN HIS DEFENSE

18 USCA § 4241 (A) US-V-WEISS BERGER 951 F2d 392
292 US APP DC 412

PLEASE SEE MOTION FOR CONTINUANCE

STATE-V-LAMBERT 266 SC 574 225 SE 28
TEST OF COMPETENCY TO ENTER
PLEA AGREEMENT IS SAME AS
REQUIRED TO STAND TRIAL ACUSED
MUST HAVE SUFFICIENT CAPABILITY
TO CONSULT WITH HIS LAWYER WITH
REASONABLE DEGREE OF RATIONAL
UNDERSTANDING AND HAVE RATIONAL
AS WELL AS FACTUAL UNDERSTANDING
OF PROCEEDINGS AGAINST HIM.

DUE PROCESS PROHIBITS THE CONVICTION
OF A PERSON WHO IS MENTALLY
INCOMPETENT = BISHOP-V-US 350

US 961 765 CT 440 100 L. ED 835 (1956)

THE RIGHT CANNOT BE WAIVED

By GUILTY PLEA = PATE-V-ROBINSON
383 US 375 86 SCT 856 15 L ED 2D
815 (1966)

PLEASE SEE MOTION FOR CONTINUANCE

3678

LEGAL MAIL
MAIL ROOM

DUE PROCESS REQUIREMENTS
WERE SATISFIED WHERE RECORD DISCLOSED
THAT BEFORE SENTENCING DEFENDANT ON HIS
PLEA OF GUILTY COURT WAS CAREFUL TO
MAKE CERTAIN THAT DEFENDANT WHO HAD
A HISTORY OF MENTAL DISORDERS WAS
MENTALLY COMPETENT AT TIME OF ARRAIGNMENT
AND SENTENCE. AND WHERE THROUGHOUT ALL
PROCEEDINGS AFTER ARREST NO ONE INCLUDING
DEFENDANT OR HIS COUNSEL CONTENDED OR
TESTIFIED THAT DEFENDANT WAS NOT MENTALLY
COMPETENT TO KNOWINGLY AND VOLUNTARILY
ENTER PLEA TO CHARGES AGAINST HIM OR
AID AND ASSIST IN HIS DEFENSE

WOLF - VS - US CA 10 (OKIA) 1970 430 F2D 443

DUE PROCESS VIOLATED BY FAILURE TO CONDUCT
COMPETENCY HEARING FOR DEFENDENT WITH
HISTORY OF MENTAL HEALTH PROBLEMS
MATA - VS - JOHNSON 210 F3D 324 332-33
(5TH CIR 2002)

- PLAIN ERROR (RULE) RULE REQUIRING AN APPELLATE COURT TO REVERSE A CONVICTION AND AWARD A NEW TRIAL ~~XXXX~~ WHEN AN OBVIOUS ERROR IN THE TRIAL PROCEEDINGS (Q35 P. 2d 1161, 1164 WHICH WAS NOT OBJECTED TO DURING THE TRIAL AND WENT UNCORRECTED BY THE TRIAL COURT. AFFECTED THE DEFENDANT'S FUNDAMENTAL RIGHT TO A FAIR TRIAL 597 F2d 1170 1199 SECTED. R CRIM. P. 52 (b) SEE MAYZTA M'NAUGHTEN COMPETENCY EVALUATION

~~FURTHER MORE IF IT IS ESTABLISHED THAT GOVERNMENT AGENCY KNOWINGLY PERMITTED THE INTRODUCTION OF FALSE TESTIMONY A REVERSAL IS VIRTUALLY AUTOMATIC.~~ * #1

- FRAUD ON THE COURT WHERE IT CAN BE DEMONSTRATED CLEARLY AND CONVINCINGLY THAT A PARTY HAS INTENTIONALLY SET IN MOTION SOME UNCONSCIONABLE SCHEME CALCULATED TO INTERFERE WITH THE JUDICIAL SYSTEMS ABILITY IMPARTIALLY TO ADJUDICATE A MATTER BY IMPROPERLY INFLUENCING THE TRIER OR UNFAIRLY HAMPERING THE PRESENTATION OF THE OPPOSING PARTY'S CLAIM OR DEFENSE 892 F2d 1115 ALSO IN A JUDICIAL MATTER-PROCEEDING A LAWYERS OR PARTY'S MISCONDUCT SO SERIOUS THAT IT UNDERMINES OR IS INTENDED TO UNDERMINE THE INTEGRITY OF THE PROCEEDING = BRIBERY OF A JUROR AND INTRODUCTION OF FABRICATED EVIDENCE

- IN JETER THIS COURT PROCLAIMED THAT IN PROVING STRICKLAND PREJUDICE WITHIN THE CONTEXT OF COUNCILS FAILURE TO FULLY INVESTIGATE THE PETITIONERS MENTAL CAPACITY THE PETITIONER NEED ONLY SHOW REASONABLE PROBABILITY THAT HE WAS EITHER INSANE AT THE TIME THE CRIME WAS COMMITTED OR INCOMPATENT AT THE TIME OF THE PLEA JETER 308 SC AT 283 417 SE 2d AT 596 ALSO UNDER RULE 60(B) THE COURT MAY RELIEVE A PARTY FROM JUDGMENT FOR THE FOLLOWING REASONS 2 NEWLY DISCOVERED EVIDENCE (3) FRAUD OR MISCONDUCT OF THE OPPOSING PARTY

IN ADDITION TO ENSURING THAT
PLEAS ARE KNOWINGLY & INTELLIGENT
JUDGES ARE ALSO SUPPOSED TO
DETERMINE IF THERE IS IN.

ADEQUATE BASIS IN FACT FOR
ACCEPTING THE PLEA THAT IS
WHETHER THE DEFENDENT COMMITTED
THE CHARGED CRIME WHEN A
DEFENDENT FORMALLY PLEADS GUILTY
OR NO CONTEST BUT ALL THE WHILE
SAYS HE IS INNOCENT A JUDGE
DOES NOT HAVE TO ACCEPT THE PLEA
MC-V-AIFORD 400 US 25. 91 S. CT 160
1970

ON PG 5 OF THE TRANSCRIPT LINE 12 & 15
DEFENDENT ANDREW BLACKMON TWICE
DENIED WHAT WAS STATED IN THE INDICTMENT

LEGAL MAIL
MAIL ROOM

ANDREW BLACKMON

THE FAILURE OF A TRIAL COURT TO
PROVIDE AN ADEQUATE COMPETENCY
DETERMINATION VIOLATES DUE
PROCESS. BY DEPRIVING THE DEFENDEN
OF HIS CONSTITUTIONAL RIGHT
TO A FAIR TRIAL.

LEGAL MAIL
MAIL ROOM

~~INEFFECTIVE ASSISTANCE OF COUNSEL~~

HILL-V-LOCKHART
474 US 52 1985

STRICKLAND STANDARD APPLIES TO GUILTY
PLEA CHALLENGES BASED ON INEFFECTIVE ASSISTANCE
OF COUNSEL IN ORDER TO SATISFY THE STRICKLAND
PREJUDICE STANDARD THE DEFENDENT MUST SHOW
THAT THERE WAS REASONABLE PROBABILITY THAT
BUT FOR COUNSEL'S ERRORS HE WOULD NOT HAVE
PLEADED GUILTY AND WOULD HAVE INSISTED ON
GOING TO TRIAL.

BECAUSE OF COUNSEL'S ERROR THE COURT DID NOT
ALLOW THE DEFENDANT TO PROCEED WITH AN INSANITY
DEFENSE AT TRIAL DUE TO TIMELY NOTICE NOT
BEING PROPERLY FILED UNDER RULE 5(F) OF SOUTH
CAROLINA RULES OF CRIMINAL PROCEDURE.

~~PLEASE SEE COUNSEL'S EXPLANATION OF ADDITIONAL~~
~~ISSUES FOR FURTHER DETAILS~~

APPELLANT RESEARCH
SERVICES
LEE 2014

LEGAL MAIL
MAIL ROOM

PSY EXAMINATIONS IN FEDERAL PROCEEDINGS THE COURT MAY BE REQUIRED TO ORDER A PSYCHIATRIC EXAMINATION, BEFORE A COMPETENCY HEARING IS HEID. ON APPEAL THE CIRCUIT COURT WILL REVIEW THE TRIAL COURTS DECISION NOT TO ORDER THE PSYCHIATRIC EXAMINATION FOR ABUSE OF DISCRETION EVEN IF THE TRIAL COURT PROPERLY DENIES AN INITIAL MOTION FOR A PSYCHIATRIC EXAMINATION. CHANGED CIRCUMSTANCES MAY REQUIRE THE COURT TO GRANT A SUBSEQUENT MOTION

~~TRIAL COURT CAN DENY ONLY FRIVOLOUS OR BAD FAITH MOTIONS LIS-V-NICHENSON 550 F.2D 502 504 8TH CIR 1977~~

LEGAL MAIL
MAIL ROOM

TEST OF COMPETENCY TO ENTER PLEAS SAME
AS REQUIRED TO STAND TRIAL; ACCUSED MUST
HAVE SUFFICIENT CAPABILITY TO CONSULT WITH
HIS LAWYER WITH REASONABLE DEGREE
OF RATIONAL UNDERSTANDING AND HAVE
HAVE RATIONAL AS WELL AS FACTUAL
UNDERSTANDING OF PROCEEDINGS
AGAINST HIM

CARLES-VS-STATE 275 SC 353 271-SE
20.121(1980)

PLEASE SEE MOTION FOR
CONTINUANCE

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DUE PROCESS VIOLATED BY
FAILURE TO CONDUCT COMPETENCY
HEARING FOR DEFENDANT WITH
HISTORY OF MENTAL HEALTH
PROBLEMS MATA-V-JHONSON 210
F3d 324 332-33 (5TH CIR 2000)

WHILE DEFENSE COUNSEL WILL OFTEN BEST
INFORMED VIEW OF DEFENDANTS ABILITY
TO PARTICIPATE IN HIS DEFENSE COUNSEL IS
NOT TRAINED MENTAL HEALTH PROFESSIONAL
AND COUNSEL'S FAILURE TO RAISE DEFENDANCE
COMPETENCY AS ISSUE DOES NOT ESTABLISH
THAT DEFENDANT WAS COMPETENT ODIE-V-
WOODFORD 258 F3D 1084

IT IS POSSIBLE TO BE FOUND INCOMPETENT
TO PLEAD GUILTY BUT COMPETENT TO STAND
TRIAL AS THE APPLICABLE STANDARDS
ARE DIFFERENT US-V-HOSKIE 950 F2d
138

DEFENDANTS COUNSEL FAILURE TO
RAISE DEFENDANTS COMPETENCY AS ISSUES
DOES NOT MEAN THAT DEFENDANT HAS WAIVED
HIS RIGHT TO COMPETENCY HEARING

A DEFENDANT MAY NOT BE PROSECUTED
WHILE HE IS INCOMPETENT AND THE STATE
MUST GIVE HIM ACCESS TO PROCEDURES
FOR DETERMINING HIS COMPETENCY (SEE)
MEDINA-V-CALIFORNIA 505 US 437 449 112
SCT 2572 LED 2d 353 (1992)

WE HAVE HELD THAT A TRIAL JUDGE MUST CONDUCT
A COMPETENCY HEARING WHENEVER THE
EVIDENCE BEFORE HIM RAISES A DOUBT
DOUBT ABOUT THE DEFENDANTS COMPETENCY
TO STAND TRIAL EVEN IF DEFENSE COUNSEL
DOES NOT ASK FOR ONE (SEE) DE KAPLAN
ENOMOTO 540 F2d 975 979 9th CIR (1976)

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SC Court of Appeals

LEGAL MAIL
MAIL ROOM

A DEFENDANT MAY NOT BE
CRIMINALLY PROSECUTED WHILE HE IS
INCOMPETENT AND THE STATE MUST GIVE HIM
ACCESS TO PROCEDURES FOR DETERMINING
HIS COMPETENCY SEE MEDINA - V - CALIFORNIA
505 US 437 449 112 SCT 2572 120 LED 2D 353 (1992)
CITING DROPE - V - MISSOURI 420 US 162 172-73 95 SCT
296 43 LED 2D 103 (1975)

TO SHOW INCOMPETENCY TO PLEAD GUILTY A DEFENDANT
MUST DEMONSTRATE THAT HIS MENTAL FACILITIES WERE
SO IMPAIRED WHEN HE PLEAD THAT HE WAS
INCAPABLE OF FULLY UNDERSTANDING AND
AND APPRECIATION OF CHARGES AGAINST HIM
OF COMPREHENDING HIS CONSTITUTIONAL
RIGHTS AND OF REALIZING THE CONSEQUENCES
OF HIS PLEA

LAW 273(2) 273.1(5)
17-24-30

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