



Ballard & Watson
Attorneys at Law
PERSISTENT. UNWAVERING.

Desa Ballard
Harvey M. Watson III

Post Office Box 6338 | West Columbia, SC 29171
226 State Street | West Columbia, SC 29169
ph 803.796.9299 | fx 803.796.1066 | desaballard.com

October 16, 2015

RECEIVED

OCT 19 2015

SC Court of Appeals

Via U.S. Mail

Joseph Bowers #00361626
Kirkland Correctional Institution Dorm #A1-45B
4344 Broad River Road
Columbia, South Carolina 29210

Re: *State v. Bowers*
Appellate Case No.: 2014-002176

Dear Mr. Bowers:

As you know we represent your prior attorney, Jim Brown, who has consented to your request to the Court of Appeals that he be relieved as counsel on your appeal. Enclosed are documents you may use to apply to the Office of Appellate Defense for representation if you qualify under their standards. Their address is:

Post Office Box 11433
Columbia, South Carolina 29211

The Court of Appeals made an error and did not process our consent to Mr. Brown being relieved when it was received, but we spoke with the court staff yesterday and reiterated our request that you be given sufficient time to find successor counsel.

Sincerely yours,

Desa Ballard
desab@desaballard.com

cc: Via U.S. Mail
Court of Appeals
Salley Elliott, Esquire
Jim Brown, Esquire (via email only)

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)

AFFIDAVIT OF INDIGENCY

Case Name _____

Criminal Case No. _____

Current Address: _____

Are you incarcerated? _____ Yes (If "Yes") Where? _____
_____ No

What were you convicted of? _____

What was your sentence? _____

Are you appealing from _____ a trial, _____ a guilty plea _____ a post-conviction relief hearing?

In what county was this trial/hearing/guilty plea held? _____

Presiding Judge's name? _____

Date of trial/guilty plea or post-conviction relief hearing _____

Were you represented by _____ a court-appointed attorney _____ public defender or _____ retained counsel?

Name of attorney/public defender? _____

If retained, how much did you pay for attorney fees? \$ _____

If you still owe money to your attorney, how much? \$ _____

1. Are you presently employed? Yes _____ No _____

a. If "yes," state the amount of your salary or wages per month, and give the name and address of your employer. _____

b. If "no," state the name and address of last employment, date of termination of employment, and amount of your salary or wages per month. _____

2. List by name, age and relationship to you, any persons who are dependent upon you for support. Indicate beside each how much you contribute toward their support. _____

3. Have you received within the past twelve months any money from any of the following sources?

a. Business, profession or form of self-employment?

Yes _____ No _____

b. Rent payments, interest or dividends?

Yes _____ No _____

c. Pensions, annuities or life insurance payments?

Yes _____ No _____

d. Gifts or inheritance?

Yes _____ No _____

e. Any other sources?

Yes _____ No _____

If the answer to any of the above is "yes," describe each source of money and state the amount received from each during the past twelve months. _____

4. Do you own cash, or do you have any money in a checking or savings account?

Yes _____ No _____

If the answer is "yes," state the total amount of the cash owned. \$ _____

5. Do you own any real estate, stocks, bonds, notes or other valuable property (excluding ordinary household furnishings and clothing)? Yes _____ No _____

If the answer is "yes," describe the property and state the appropriate value of the items owned. _____

6. What kind of motor vehicle do you own? _____

Is it paid for? Yes _____ No _____

If not, what are the monthly payments? \$ _____

7. How much do you owe (on liens, mortgages, other encumbrances or debts)? _____

I do solemnly swear that the account by me delivered into this Court does contain a true and full account of all my real and personal estate, debts, credits and effects whatsoever without exception, which I, or any person in trust for me, have or at the time of my possession had, or am, or was, in respect, entitled to, in possession, remainder or reversion and that I have not at any time since charges were made against me or before, directly or time since charges were made against me or before, directly or indirectly sold, leased, assigned or otherwise disposed of or made over, in trust for myself or otherwise, other than is mentioned herein.

I understand that the State shall file a claim against me in an amount equal to the cost for representation, but that such claim shall not constitute a lien against my property, unless, the claim is reduced to judgment by the Order of the Court after giving me at least thirty days' notice.

Under penalty of perjury, I certify that the information give by me on this affidavit is true and correct, and I understand that I will be subject to civil and/or criminal penalties if I knowingly furnish false information.

I am financially unable to employ counsel.

This _____ day of _____, _____.

Defendant

I understand that I am entitled to at least thirty days' notice before a claim against me may be reduced to judgment, and I do hereby waive the right to such notice.

This _____ day of _____, _____.

Defendant

SUBSCRIBED AND SWORN to before
me this _____ day of _____, _____.

NOTARY PUBLIC FOR SOUTH CAROLINA

My commission Expires: _____

LAW OFFICES OF DESA BALLARD

226 STATE STREET

WEST COLUMBIA, SOUTH CAROLINA 29169

COLUMBIA

SC 290

16 OCT '15

PM 3 L



02 1P

\$ 000.48⁵

0001838218 OCT 16 2015

MAILED FROM ZIP CODE 29170

Honorable Jenny Abbott Kitchings
South Carolina Court of Appeals
1220 Senate Street
Columbia, South Carolina 29201

RECEIVED

OCT 19 2015

SC Court of Appeals

29201376999

