

February 15, 2018

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RE: Appellate Case # 2016-001544 / Common Pleas # 2016CP4002459

To:  
Court of Common Pleas, 5<sup>th</sup> Circuit (Richland County)  
1701 Main Street  
Columbia, SC 29201  
803-576-1950

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FEB 15 2018

SC Court of Appeals

Dear Court of Common Pleas Honorable Judges,

*I really wasn't going to write a letter but, I can't really not in this situation.*

I filed a case to appeal an invalid commitment order a while ago and not a single one of the judges anywhere could see that it didn't meet the statutory requirements to state mental illness or danger to self or others. I couldn't believe that the doctor said during the special proceeding, that's what I'm calling it, that, "We don't know if there was actually a gun." I saw a gun, I said there was a gun, there was a gun. What really upset me is that I went over a month later back to the location of the gun, and bam, the street gun was still there... *Good job Columbia Police Department, you got me so good.* I talked to one of the Sheriff's SWAT guys over there at Boozer Center off of Broad River and all was taken care of.

*I'm no danger, I was reporting a crime. This is some civil terrorism if I've ever seen it.*

Anyway, my concern is over the appeal that was just issued a remittitur (Appellate Case # 2016-001544), did I really even need to appeal this thing? It's so obvious, I went directly to court and explained exactly what happened. On its face, the order is invalid for not stating the harm that was thought to be caused by me based upon the facts. I really thought that the order was so obviously invalid that it should have been overturned, when invalid orders like this stack up, they going to stack up, you know what I'm saying.

*I had this feeling that planning to have kids later, doesn't mean that you can't have them now, but if you want them later, having one now wouldn't be the worst time, it would happen eventually, just in such circumstances that it wouldn't be the best time, but when is?*

I can't tell you enough that I'm not mentally ill and not a danger to myself and not a danger to others, but it seems like my personality is so original that being analyzed by some MD to create a diagnosis out of my personality is not the answer, but if it was a diagnosis, then at least that would legally protect my personality/likeness in a way that I could be the only one to be the way that I am. I'm a good role model and you are confusing people on that fact and essentially scaring people and upsetting me that people who act like me are going to be victims of commitment orders. You can't use this procedure to attempt to intimidate the masses.

To the doctor at Palmetto Health Richland Springs, I always wanted to say, how is saying that you are wearing some nice Tori Birch shoes sexual harassment? Don't wear such fancy shoes if you don't want a comment about them. The doctor was un-relatable no matter what I tried. She has what I'm now terming KS Syndrome, which is explained as such:

Asking questions that you know the answer to, but omitting questions you also know the answer to, that would negate the first set of questions that you asked, but acting upon only the answers to the questions that you asked for the specific purpose of getting a diagnosis that you were aiming for.

*i.e.* A doctor has a list of observations from staff members. The doctor interviews the patient and asks only questions that would lead to a diagnosis. – (1) The doctor could ask, “What was this thing about bombs?” (2) I'd say, “Oh, the local news said Madrid was bombed the other day.” (3) The doctor then would note that the patient was talking about bombs. (4) Doctor would mark you down as an invalid. (5) Doctor goes to court to recap her notes. (6) Doctor says, “I've got a lot of patients but my notes are accurate.” (CONCLUSION) – The Doctor would be obtaining an expected diagnosis based upon carefully crafted questioning while omitting sound reasoning, that would of course, lead to the Doctor's aimed for diagnosis. – Now known as 'KS Syndrom' (Laymen Terms: The Doctor's mental illness diagnosis rubs off onto the patient)

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Ultimately I was going to be a bit rude, because SHALL is not the same as MUST, but if you want shall to be the same as must, then I'd love that! But sadly it is not the same, especially when shall is used and there is a time frame involved without a statement of what happens if it is not followed. I did it as soon as possible, or if you prefer, you could say that it was a harmless error when filing for what state code says is a right.

*What's a right to appeal, you'd know better than me, right?*

Great news, you can just overturn the thing, because I kind of was taking the long route to appeal the legal error made by the circuit court to then have them actually listen to my right for appeal and my valid arguments. But since we all can see now, how invalid this thing is, since I just ignore it anyway and nobody has said I was wrong to treat it invalidly, let's just make it official:

### **THE ORDER THAT WAS ISSUED IN MARCH 2016 IS INVALID, END OF STORY.**

Let's all concur. My intent for the appeal: I was seriously trying to get case law so that the 15 days didn't run until after you are out of confinement. Which would have been some solid case law for the benefit of a lot of people, so that these people couldn't be victimized by a behavioral health hospital. In the long run, coming up with that kind of case law will save you a lot of time and be more aligned with the intent of the law. Legislature didn't put “right to appeal” in the code for nothing and didn't put “shall” for nothing. It's literally just to say, “Hey, 15 days, but if you can't, you better do it expeditiously so that, the court, doesn't have to deal with stale issues. At some point the issue must just lie.”

To The Appellate Court of South Carolina, (1) pull the case back, or something, or sit in a capacity of circuit court judges to take advantage of a huge opportunity to protect the rights of people who are wrongfully accused of mental illness. (2) Publish the case...

*Do I have to explain everything?*

*I literally thought this was such common knowledge, especially with everyone changing 'shall' to 'must' these days.*

So, I've found out recently working with law enforcement in this region that the knowledge they lack is massive. But then I say to myself, maybe I just know a lot and they really aren't lacking. You know what I'm saying. I'd even argue on some of the uses of must, if I had to.

*You're not lacking in knowledge, I just know a lot and just found out that I can't assume people are going to know what I believe to be such commonly used concepts. Or they actually do lack the knowledge because they are such commonly used concepts.*

Look, I think I've said enough. You want more, you got my number/email, give me a topic, I'll write you a report, 24/7, you know that. This was just a longer topic than I was expecting and I'm cutting it short.

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(CONCLUSION)

Make the case law proper on this: Maximum 15 court days after commitment. Because I couldn't for the life of me get anything done in the hospital when it came to legal matters. In a sense, do something... publication is a must on this case, after you correct this harmless error.

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