

# ATTORNEY OFFICE OF DONALD SMITH

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Donald L. Smith, Esquire

Telephone: (864) 642-9284  
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February 26, 2018  
(THIRD ATTEMPT)

Dean Alton Holcomb  
SCDCC ID: 00369696  
4344 Broad River, Rd.  
Columbia SC 29210

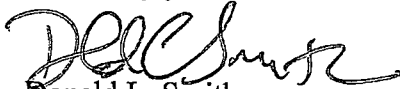
**RECEIVED**  
MAR 01 2018  
SC Court of Appeals

Dear Dean:

I had the opportunity to speak to Mr. Dudek, today. It appears his office will be taking the reigns of your appeal in the intimidation cases. As you are aware, Mr. Dudek and his staff address appellate issues on a regular basis. I have great respect for their work and believe that you will be in good hands. I know that they represented my interests at a very high level. I am confident that they will do the same for you.

However, it is imperative that you work with them. Specifically, while I recognize that your response regarding the question of indigency, it is a hoop that must be addressed. Please complete the enclosed documentation and return it to me in the enclosed envelope. Please note that I do not believe that you got any semblance of due process. Give yourself a chance and get the materials back to me-notarized. Don't let them win.

With highest regards, I remain  
Very truly yours,



Donald L. Smith  
DLS/ds

cc: The Honorable Jenny Kitchings  
Mr. Robert M. Dudek, Chief Appellate Defender  
Ms. Kelly Arnold, Esquire



# SCCID

SOUTH CAROLINA COMMISSION ON INDIGENT DEFENSE

Division of Appellate Defense  
1330 Lady Street, Suite 401  
Columbia, South Carolina 29201-3332  
Post Office Box 11589  
Columbia, South Carolina 29211-1589  
Telephone: (803) 734-1330  
Facsimile: (803) 734-1397

Robert M. Dudek, Chief Appellate Defender  
Wanda H. Carter, Deputy Chief Appellate Defender

February 6, 2018

Mr. Donald L. Smith, Esquire  
122 N. Main Street  
Anderson, SC 29621

**RECEIVED**  
MAR 01 2018  
SC Court of Appeals

Re: The State v. Dean A. Holcomb - Appellate case No. 2017-001659

Dear Mr. Smith:

As per your conversation with Mr. Dudek today regarding Mr. Holcomb's appeal, we were informed you have been retained. Therefore, we must complete the screening process.

Mr. Holcomb must complete the attached affidavit of indigency pursuant to the terms of South Carolina Appellate Court Rule 602(E). I have enclosed an affidavit of indigency. **Please have your client complete all questions on the affidavit and have it notarized and returned to us by February 20, 2018**, so that we may review it before the deadline to request the transcript from the court reporter. If we determine the client is indigent, we will handle the appeal, subject to Rule 602(e)(4), SCACR. However, if you are unable to return the affidavit to us by this deadline, it will be necessary for you to request an extension to order the transcript.

Please note that under no circumstances can this Office compensate private counsel for costs of transcripts or printing, which have been incurred by counsel. Any transcripts or printing must be ordered by this Office if we are to pay for them.

I look forward to hearing from you and thank you for your kind assistance in this matter.

Sincerely,

Paula Murdoch  
Administrative Coordinator

Enclosures

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. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR A POST-CONVICTION RELIEF APPEAL WE NEED THE FOLLOWING:**

1. Original trial conviction transcript;
2. Application for post conviction relief and amended application(s), if any;
3. True-billed indictment(s) (front and back);
4. Final signed written Order of the judge denying post-conviction;
5. Copy of the Notice of Intent to Appeal with proof of service on opposing counsel, and date of filing with the Court;
6. State's Return and Motion to Dismiss and all attachments and any amended return;
7. Order of letter of Appointment, or Affidavit of Indigency and signed Order of Indigency; and
8. Names and addresses of all court reporters and hearing dates.

**FOR A DIRECT APPEAL WE NEED THE FOLLOWING:**

1. True-billed indictments, arrest warrants and accompanying affidavits and statements;
2. Sentence Sheets;
3. Copy of the Notice of Intent to Appeal with proof of service and date of filing with the Court;
4. Name and address of Court Reporter(s) (including trials in absentia, pretrial, motions, post-trial, etc.);
5. Copy of any voir dire requests, written motions or requests to charge or memoranda that you made at the time of trial;
6. Copies of any and all written Exhibits introduced at trial and any and all motions filed by the defense or prosecution; and
7. Order of Appointment, or Affidavit of Indigency and signed Order of Indigency.

NOTE: We cannot meaningfully review the transcript to ascertain errors unless we have your requests to charge and requested voir dire questions which were denied. Please send these with the above information.

**FOR A PROBATION REVOCATION APPEAL WE NEED THE FOLLOWING:**

1. Notice of Intention to Appeal;
2. Original Indictment - true bill front and back for which the probationary sentence was pronounced or waiver in wright of the presentment;
3. Original Probation Order;
4. Revocation Warrant;
5. Order of Revocation; and
6. Names and addresses of court reporters for revocation hearing and any other hearings held.

**FOR A JUVENILE CASE WE NEED THE FOLLOWING:**

1. Juvenile Petition;
2. Adjudicatory Order;
3. Commitment Order;
4. All written motions, warrants (arrest and search), and confessions or statements where relevant;
5. Copy of Notice of Intention to Appeal with proof of service, date of filing with the Supreme Court and the Clerk of Court;
6. Name and address of the Court Reporter(s), and all the dates of hearing that took place during your time as counsel (dispositional, adjudicatory, post-evaluation and waiver hearings);
7. True copies of any and all written Exhibits introduced at trial and any and all motions filed by the defense or prosecution;
8. Order of letter of Appointment, or Affidavit of Indigency and signed Order of Indigency.

**FOR A SVP APPEAL WE NEED THE FOLLOWING:**

1. True-billed indictment(s) (front and back);
2. Multidisciplinary Team Report;
3. State's Petition with Exhibits;
4. Probable Cause Order by Judge;
5. Probable Cause Transcript (if a probable cause appeal);
6. Order for Psychiatric Evaluation;
7. Exhibits;
8. Psychiatric Evaluation;
9. Order of Commitment

**FOR ALL CASES WE NEED ANY AND ALL DATES OF TRIAL  
AND/OR ALL HEARINGS AS WELL AS NAMES OF THE  
COURT REPORTERS.**

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

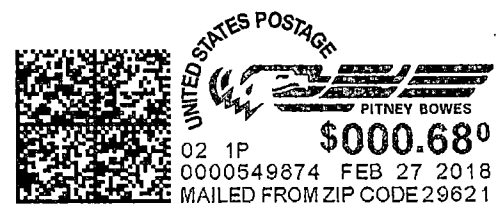
SUBSCRIBED AND SWORN to before  
me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC FOR SOUTH CAROLINA

My commission Expires: \_\_\_\_\_

Attorney Office of Donald Smith  
122 N. Main Street  
Anderson SC 29621

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**RECEIVED**

MAR 01 2018

SC Court of Appeals

The Honorable Jenny Abbott Kitchings  
Clerk of Court, South Carolina Court of Appeals  
PO Box 11629  
Columbia SC 29211

29211-162929

