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JAN 24 2020

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S.C. SUPREME COURT

PLEASE REPLY TO:
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January 24, 2020

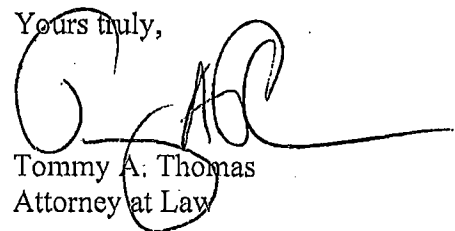
Latteria Hill #370974
Leath Correctional Institution
2809 Airport Road
Greenwood, SC 29649

Dear Latteria:

I hope this letter finds you doing well. On December 18, 2019, I mailed you an Affidavit for you to sign and return to me. As of this date, I have not received it back for you. Please be advised that the Supreme Court cannot dismiss your Appeal until they are certain that you are fully aware of the consequences of withdrawing your appeal. Please take the enclosed form to a notary at your institution before signing it and return it to me as soon as possible.

Please contact me should you have any questions.

Yours truly,



Tommy A. Thomas
Attorney at Law

TAT/jem

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)

IN THE SUPREME COURT
OF
SOUTH CAROLINA

_____, PETITIONER,)

v.)

AFFIDAVIT

STATE OF SOUTH CAROLINA, RESPONDENT.)

PERSONALLY appeared before me, _____, who being sworn, deposes and says:

1. I am the petitioner in the above case.
2. A notice of appeal has been filed on my behalf in this matter. I understand that I have a right to seek appellate review and that I am entitled to an appointed attorney to assist me due to my indigent status. It is my desire to withdraw the notice of appeal.
3. The attorney representing me in this matter has advised me of the consequences of withdrawing this appeal. If the appeal is withdrawn, I understand that the notice of appeal will be dismissed and this will mean that the decision of the circuit court will be the final decision in this matter. I understand that I will not be able to seek review in this matter at some later time.
4. I have made the decision to withdraw this appeal. This decision is made of my own free will with a full understanding of the consequences of withdrawing this appeal. I request that the notice of appeal be withdrawn and that the notice of appeal be dismissed.

Signature of Petitioner

SWORN TO before me this _____
day of _____, 20_____.

Notary Public for South Carolina
My Commission Expires: _____