



The Supreme Court of South Carolina

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November 5, 2020

Mr. Marcus Wright
McCormick Correctional Institution
386 Redemption Way
McCormick, SC 29899

Re: Marcus Wright v. State
Appellate Case No. 2020-001265

Dear Mr. Wright:

Based on a request from your retained counsel, Beattie B. Ashmore, Esquire, this appellate proceeding will be held in abeyance until a determination is made regarding who will be representing you in this appellate proceeding.¹

I would strongly encourage you to obtain counsel to represent you in this appellate proceeding. If you intend to retain private counsel, you should advise this Court of the name of this retained counsel within fifteen (15) days of the date of this letter.

If you cannot afford counsel and desire to be represented by appointed counsel, you must complete and return the enclosed Affidavit of Indigency to this office within fifteen (15) days of the date of this letter. The Division of Appellate Defense of the South Carolina Office of Indigent Defense will use this completed Affidavit to determine if you qualify to have appointed counsel. If you have

¹ Ms. Ashmore indicates she was only retained to represent you before the circuit court.

already completed and submitted an Affidavit of Indigency to the Division of Appellate Defense, I ask that you advise this Court of that fact within fifteen (15) days of the date of this letter.

If you desire to proceed *pro se* in this case, that is to represent yourself in this case without counsel, you will need to advise this Court of this desire within fifteen (15) days of the date of this letter. The Court will not allow you to proceed without counsel unless it finds you are making a knowing and intelligent waiver of the right to counsel. *See Faretta v. California*, 422 U.S. 806 (1975); *State v. Brewer*, 328 S.C. 117, 492 S.E.2d 97 (1997).

I warn you that there are many dangers and disadvantages to proceeding *pro se* in this case. If you are allowed to proceed *pro se*, this Court will require full compliance with all applicable rules and procedures, and failure to comply with such rules and procedures could result in the dismissal of the matter and forfeiture of the right to discretionary review. Further, since you are untrained in the law, having an attorney represent you in this case would be highly beneficial, and I would strongly encourage you either retain counsel or seek to have counsel appointed if you are indigent.

If you fail to make one of the responses outlined above within fifteen (15) days of the date of this letter, the Court could find that you have waived your right to be represented by counsel in this appellate case. This could result in you having to proceed *pro se* which dangers and disadvantages outlined above.

Very truly yours,

A handwritten signature in black ink, appearing to be "D.E.S.", with a long horizontal flourish extending to the right.

CLERK

Enclosure

cc: Beattie B. Ashmore, Esquire
Johnny Ellis James, Jr., Esquire

STATE OF SOUTH CAROLINA)

IN THE SUPREME COURT

COUNTY OF _____)

**AFFIDAVIT OF INDIGENCY
AND
APPLICATION FOR COUNSEL**

Marcus Wright, Petitioner,)

v.)

State of South Carolina, Respondent.)

Appellate Case No. 2020-001265)
_____)

NAME OF APPLICANT	Marcus Wright
ADDRESS	
TELEPHONE NUMBER(S)	
DATE OF BIRTH	
SOCIAL SECURITY NO.	
NAMES OF CO-DEFENDANTS	

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.

SALARY OR WAGES PER MONTH	NAME AND ADDRESS OF EMPLOYER

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

SALARY OR WAGES PER MONTH	NAME AND ADDRESS OF EMPLOYER	TERMINATION DATE

2. Include employment information for the spouse, if applicable.

SALARY OR WAGES PER MONTH	NAME AND ADDRESS OF EMPLOYER

If the spouse is not currently employed, state the name and address of last employment, date of termination of employment, and amount of salary or wages per month.

SALARY OR WAGES PER MONTH	NAME AND ADDRESS OF EMPLOYER	TERMINATION DATE

3. 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.

NAME	AGE	RELATIONSHIP	AMOUNT OF SUPPORT

4. 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 inheritances? 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.

SOURCE OF MONEY	AMOUNT

5. 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. _____

6. 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.

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

Is it paid for?

Yes

No

If not, what are the payments? _____

8. 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 with my application for counsel 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 any 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 indirectly sold, leased, assigned or otherwise disposed of or made over, in trust for myself or otherwise, other than is mentioned herein.

I understand the appointment of counsel creates a claim against the assets and estate of the person who is provided counsel or the parents or legal guardians of a juvenile in an amount equal to the cost of representation less the amount paid to appointed counsel, the public defender office and/or the Commission on Indigent Defense. I understand that such claim shall be filed in the office of the Clerk of Court in the county where I, my child, or ward are assigned counsel, but that the filing of a claim shall not constitute a lien against my real or personal property unless, in the discretion of the court, part of all of such claim is reduced to judgment by appropriate order of the court after serving me with at least thirty (30) days notice that judgment will be entered.

I am financially unable to employ counsel and request that counsel be assigned to represent me. 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 _____, 2020

Marcus Wright

Subscribed and sworn to before me this

_____ day of _____, _____

(L.S.)

Notary Public for South Carolina

My Commission Expires: _____