

First Appearance Date _____

Second Judicial Circuit First Appearance Affidavit

The State of South Carolina Vs _____

Warrant number(s): _____

Please read carefully and initial each term that applies:

1. _____ I have:
 - _____ as my attorney, **OR**
 - plan to retain _____ as my attorney, **AND/OR**
 - I will proceed without an attorney, and as such I will be required to appear on the below listed date and remain until excused.
2. _____ I or my attorney have received discovery for this case or plan to request it.
3. _____ I waive my right to a preliminary hearing.
 I understand I may request a preliminary hearing either personally or through my attorney.
4. _____ I understand that an offer to resolve this case may be made prior to the next court appearance date.
5. _____ I understand my attorney and/or bondsman (or surety), will be the **ONLY** person notified by the Clerk's Office when my presence is required for Court.
6. _____ I must keep my attorney and/or bondsman (or surety) advised of my location at all times and furthermore my bond requirements are not affected (special conditions or bonding company requirements) by this document.
7. _____ I understand and agree that if I cannot be located by my attorney when I am required to be present for trial, plea or otherwise, my case will be tried in my absence or a Bench Warrant will be requested for my failure to appear.
8. _____ I understand this agreement only covers the charges I am appearing on today, and does not affect charges I already have or any additional charges that happen after this appearance.
9. _____ I acknowledge this case is on the **180** track **270** track **375** track or is **complex** for these reasons: _____.

TO DEFENSE ATTORNEY: I am not aware of a conflict regarding my representation or any mental health issues of the client at this time.

- I understand that I must appear at the Aiken County Courthouse (*date*) _____ for (*circle one*) **SECOND APPEARANCE, PTI APPOINTMENT**, or at such time that I am notified.
- I have read the above information and I understand and agree that the information is correct.
- I agree to hold my Attorney harmless for any information provided.
- It is my responsibility to provide contact information to my Attorney and to keep it up to date.

Defendant signature

Attorney for Defendant

Done this _____ day of _____, 20____

Attorney for the State

First Appearance Date _____

Notice: Effective immediately for all Criminal Cases filed in Aiken County General Sessions Court.

Per Judge's recommendation, **all attorneys need to file a Letter of Representation** with the Clerk of Court Office to advise us that you are representing a defendant on a case.

Attorneys may also file a First Appearance Affidavit. This report can be found on the reverse side of this notice. If an attorney chooses to file this report he/she will be excused from the appearance date as well as the defendant. However, this report needs to be completed no earlier than (10) ten days prior to the appearance date. The Clerk's Office must receive this report no later than **NOON**, the day before the appearance date.

If additional information is required, please contact Angel Miles or Katie Williams via email at amiles@aikencountysc.gov or kwilliams@aikencountysc.gov