

VOLUNTARY STATEMENT

STATE OF SOUTH CAROLINA

COUNTY OF _____

PERSONALLY appeared before me _____, who states:

"My name is _____ My address is _____

Date of Birth: _____ Social Security Number: _____ Phone Number: _____

I completed the _____ grade in school, and I cannot read and write".

Before answering any questions or making any statements, _____

a person who identified himself as _____ duly warned and advised me, and I know and understand that I have the following rights: That I have the right to remain silent and I do not have to answer any questions or make any statements at all; that any statement I make can and will be used against me in a court or courts of law for the offense or offenses concerning which the following statement is hereinafter made; that I have the right to consult with a lawyer of my own choice before or at anytime during any questioning or statements I make; that if I cannot afford to hire a lawyer, I may request and have a lawyer appointed for me by the proper authority before or at anytime during any questioning or statements that I make, without cost or expense to me; that I can stop answering any questions or making any statements at any time that I choose, and call for the presence of a lawyer to advise me before continuing any more questioning or making any more statements, whether or not I have already answered some questions or made some statements.

I do not want to talk to a lawyer, and I hereby knowingly and purposely waive my right to remain silent, and my right to have a lawyer present while I make the following statement to the aforesaid person, knowing that I have the right and privilege to terminate any interview at any time hereafter and have a lawyer present with me before answering any more questions or making any more statements, if I choose to do so.

I declare that the following voluntary statement is made of my own free will without promise or hope of reward, without fear or threat of physical harm, without coercion, favor or offer of favor, without leniency or offer of leniency, by any person or persons whomsoever.

I have read each page of this statement consisting of _____ page(s), each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the facts contained herein are true and correct. I further certify that I made no request for the advice or presence of a lawyer before or during any part of this statement, nor at any time before it was finished did I request that this statement be stopped. I also declare that I was not told or prompted what to say in this statement.

This statement was completed at _____ .M. on the _____ day of _____, 20_____.

SWORN TO AND SUBSCRIBED TO BEFORE ME THIS _____ DAY OF _____, 20_____

Signature of person giving voluntary statement

NOTARY PUBLIC FOR SOUTH CAROLINA
My Commission Expires: _____

WITNESS: _____

WITNESS: _____