

PPP Victim Notifications

90. Does PPP send required notifications to victims by default or wait to have a victim request notification?

PPP sends *initial* notifications by default to all victims where we receive victim contact information from the Solicitor's Office.

For straight time cases, PPP will send receipt letters to all victims where we receive victim information from the Solicitor's Office. This letter notifies the victim they are registered with PPP and will receive notifications in their case if applicable. The letter also advises the victim of their responsibility to update their address with our agency should it change as well as provide information to register with SCDC. **(Please see the attachment labeled "Question 90- Office of Victim Services- Receipt Letters.")**

For straight probation and split probation cases, PPP will send initial notifications to all victims where we receive victim information from the Solicitor's Office. The initial notification letter advises the victim of the sentence the offender received as well as standard and special conditions. The letter also asks the victim to respond within in 30 days, complete and send the enclosed Victim Response Form back to the county office if they wish to continue to be notified and remain active in the case. Once the victim advocate in the county office sends the initial notification letter (Form 1165), the notification status is turned to 'N' until the victim returns the victim response form indicating they wish to continue notification. **(Please see the attachment labeled "Question 90- Office of Victim Services- Initial Notification Letter.")**

State of South Carolina
Department of Probation, Parole and Pardon Services

HENRY McMASTER
Governor



JERRY B. ADGER
Director

181 N Irby Street Suite 3100
FLORENCE, SC 29501
(843)665-3063
Fax (843)665-3029

September 21, 2021

FLORENCE COUNTY DSS
2685 S IRBY ST
BOX A
FLORENCE, SC 29505

Offender: SMITH, DANA MARIE

Offense: Legal custodian, unlawful neglect of child or helpless person

Date of Sentence: 9/20/2021

Indictment Number: 21-GS-21-00835

Offender SID: 02407297

Dear FLORENCE COUNTY DSS,

Our records indicate that you are a victim in the above referenced case or a contact person for the victim. Please be advised that the above named offender was sentenced to 4 YEARS SUSPENDED TO 2 YEARS PROBATION. Enclosed are the conditions of supervision and any special conditions that the Judge ordered in this case. If the offender was sentenced to serve time first, the probation will begin once the offender is released from prison.

If you wish to receive continued notification regarding this case, please check the appropriate box on page 4 of this packet (the Victim Response Form) and return it to the above address. **If we do not receive a response from you within thirty days, we will assume that you do not wish to receive further notification.** You may also use the Victim Response Form to make any comments or to note a change in your name, address, or telephone number. **It is very important that you keep us informed of any changes.** You may keep the remainder of this packet for your records.

The Office of Victim Services has information about community referrals to assist you and your family. If you need any assistance, or have any questions as a result of this offense, please do not hesitate to call me at the above number, or toll-free at 888-551-4118 (victims only, please). If I am unavailable, please leave a message and I will return your call.

Sincerely,

Daune Dawson
12th Circuit Victim Advocate

STANDARD CONDITIONS OF SUPERVISION

1. I shall report in person to the South Carolina Department of Probation, Parole and Pardon Services' office on the day of my sentencing or release and as instructed by the Department; and I shall make complete and truthful reports to the Agent.
2. I shall not change my residence or employment without the consent of my Agent. Further, I shall allow my Agent to visit me in my home, at my place of employment, or elsewhere, at any time.
3. I shall not use controlled substances, except when properly prescribed by a licensed physician, nor consume alcoholic beverages to excess, nor enter establishments whose primary business is the sale and drinking of alcoholic beverages. Further, I shall submit to a urinalysis, blood test or provide forensic evidence when instructed by Agents of the Department, and I agree that any of these test results may be used as evidence in any hearing for the violation of the conditions of my supervision.
4. I shall not possess or purchase any firearm or other dangerous weapons, and I shall not associate with any person who has a criminal record, or any other person whom my Agent has instructed me to avoid.
5. I shall work diligently at a lawful occupation. Further, I shall notify my Agent if I become unemployed.
6. I shall not violate any Federal, State, or Local Law, and I shall contact my Agent if I am ever arrested or questioned by a law enforcement official for any reason whatsoever.
7. I shall pay a supervision fee and any other fees as determined by the Department.
8. I shall not leave the State without permission from my Agent. Further, if I am ever arrested in another state for violating these conditions, I hereby irrevocably waive all extradition rights I may otherwise have been entitled to and agree to return to South Carolina when directed by my Agent, the court, or by a warrant.
9. I shall obey all conditions of supervision set forth in this order including the payment of fines, restitution, or other payments, and the service of any period of incarceration.
10. I shall follow the advice and instructions of my Agent and I agree to comply with any further conditions imposed by the Department or its Agents.
11. I agree to pay restitution and statutory collection fee payable to the Department of Probation, Parole and Pardon Services as directed by Agents of the department. (20% collection fee charged)
12. Unless I was convicted of or pled guilty or nolo contendere to a Class C misdemeanor or an unclassified misdemeanor that carries a term of imprisonment of not more than one year, I shall be subject to a search or seizure, without a search warrant, based on reasonable suspicions, of my person, any vehicle I own or am driving, and any of my possessions by 1) any probation Agent employed with the Department; or 2) any other law enforcement officer.

SPECIAL CONDITIONS OF SUPERVISION

In addition to the regular conditions of supervision, the offender may be ordered to comply with some of the special conditions listed below. The conditions that are checked apply to your case.

- ☐ RESTITUTION – The offender must pay \$ in restitution to you. In accordance with state law, the offender is required to pay an additional 20% in administrative fees, and this is part of the monthly payment. While we encourage full payment each month, we will accept partial payment. Also, please note that other individuals may also be receiving restitution from this same offender. The monthly payments are prorated among all recipients, which will determine how much you receive. Our policy is to mail a payment once \$20.00 or more has accumulated in your account. However, if you would like to receive a different amount, you may indicate so on page 4 of this packet (Victim Response Form). Per Department policy, the offender may be six payments in arrears before we schedule a violation hearing. If the offender was ordered to pay restitution and we do not have your current mailing address on file, it could result in your restitution being considered unclaimed, and you may not be able to recover these monies.

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- ☐ INTENSIVE SUPERVISION – The offender must report at least biweekly to the probation office. Also, the Agents make more frequent home visits, employment visits, and face-to-face contacts.

- ☐ WEEKEND TIME – The offender may serve any ordered jail time on the weekends.

- ☐ PUBLIC SERVICE EMPLOYMENT – The offender is required to perform up to 500 hours of work, without pay, for a tax-supported or non-profit agency.

- ☒ URINALYSIS – All offenders are required to submit to periodic drug testing. This offender was specifically ordered by the court to be tested.

- ☒ SUBSTANCE ABUSE COUNSELING – The offender must attend an approved treatment program. This may be an inpatient center, outpatient individual or group therapy, or a combination.

- ☐ OTHER COUNSELING – ☐ Mental Health ☐ Anger Management ☐ Parenting Skills

- ☐ BATTERERS' TREATMENT – The offender must attend an approved domestic abuse program.

- ☐ DOMESTIC VIOLENCE CONDITIONS – The offender must comply with the enclosed extra conditions.

- ☐ HOME DETENTION – The offender will be confined to his/her residence at all times, or for a specified amount of time each day, as determined by the court or supervising Agent.

- ☐ ELECTRONIC MONITORING – This condition is similar to Home Detention, except the offender is required to wear a Global Positioning System (GPS) device attached to his/her ankle which monitors their physical location during specified times.

- ☐ OBTAIN GED – The offender is required to enroll in a GED program or equivalent educational course.

- ☐ VOC REHAB – The offender must be evaluated by the SC Vocational Rehabilitation Department for eligibility for services needed to gain or maintain suitable employment.

- ☐ TRANSFER SUPERVISION – Supervision of this case will be transferred to the State of .

- ☒ COMPLIANCE CREDITS – If the date of offense is on or after January 1, 2011, the offender will be eligible to earn compliance credits. These can be applied towards an offender's supervision period to establish an earlier end date for supervision. An offender may earn up to 20 days of compliance credits for each 30 days of supervision if he/she is compliant with all the conditions of supervision.

- ☐ PTUP – Probation is to be terminated upon certification that all monies have been paid.

- ☒ COURT COSTS – The offender must pay fines/fees to the Clerk of Court in the county of sentencing.

- ☐ NO CONTACT – The offender is to have no contact with victim and/or victim's family.

- ☒ OTHER CONDITIONS – MUST COMPLY WITH ANY DSS TREATMENT PLANS.

VICTIM RESPONSE FORM

Please complete and return within 30 days.

Please indicate your current phone numbers. If your address or name is incorrect on this form, please provide the correct information. **It is important to let our Department know if your address or phone number changes.**

FLORENCE COUNTY DSS
2685 S IRBY ST
BOX A
FLORENCE, SC 29505

For Identification Purposes Only

Date of Birth _____

Sex: Male _____ Female _____ Race _____

Driver's License # _____ State _____

Federal Tax ID# _____

(Businesses only)

Home Phone: _____ Work Phone: _____ Cell Phone: _____

If you are not the actual victim, please indicate your relationship to the victim:

Email Address: _____

Other Contact: Name: _____ Phone: _____ Relationship: _____

Offender's Name: SMITH, DANA MARIE Indictment #: 21-GS-21-00835
Offense: Legal custodian, unlawful neglect of child or helpless person
Date of Sentence: 9/20/2021 Offender SID: 02407297

NOTIFICATION (Please indicate your preference even if you have already completed a form with the solicitor's office.)

☐ I do want to be notified of post sentence hearings regarding this case.

☐ I do not want to be notified of post sentence hearings regarding this case.

If we do not receive a response from you within thirty days, we will assume that you do not wish to receive further notification.

RESTITUTION (Applies to you **only** if restitution has been ordered in your case. See page 3 of this packet.)

☐ I prefer to wait until at least \$20 has accumulated in my account before a check is issued (standard policy).

☐ I prefer to receive a check when at least \$1 has accumulated in my account, or specify other amount \$_____.

Please include any comments you wish to make in this space (Use the back for additional space):

Your Signature _____ Date _____

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Columbia, South Carolina 29202
Telephone: (803) 734-9220
Fax: (803) 734-8822
www.dppps.sc.gov

September 21, 2021

«Victim_Name»
«Attn_»
«Street_Address»
«CityZip»

Re: «Inmate_Name», SCDC#«SCDC»

Dear «Salutation»:

This letter is to acknowledge the receipt of your victim registration form in our office. We have registered you in the case of «Inmate_Name», SCDC#«SCDC». Our office notifies registered victims of parole hearings and any subsequent release to parole supervision. It is your responsibility to keep us informed if your mailing address or telephone number changes. The inmate has a projected parole eligibility of «DATE_1», which is subject to change.

It is your responsibility to register with the South Carolina Department of Corrections. The SC Department of Corrections notifies registered victims in the event of releases and escapes. The telephone number for the Division of Victim Services at the SC Department of Corrections is (803) 896-1733 in the Columbia area or toll free, 1-800-835-0304. The SC Attorney General's Office notifies victims of all State Appeals filed regarding the conviction. The toll free telephone number for the Attorney General's office is 1-800-213-5652. It is your responsibility to keep SCDC and the SC Attorney General's Office informed of any mailing address or phone number changes.

If our office can assist you, please contact our office in the Columbia area at (803)734-9220 or outside the Columbia area, toll-free, at 1-888-551-4118.

Sincerely,

Yvonne Conte
Victim Services Specialist

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Re: «Inmate_Name», SCDC#«SCDC»

Dear «Salutation»:

This letter is to acknowledge the receipt of your victim registration form in our office. We have registered you in the case of «Inmate_Name», SCDC#«SCDC». Our office notifies registered victims of parole hearings and any subsequent release to parole supervision. **It is your responsibility to keep us informed if your mailing address or telephone number changes.** The inmate is scheduled to complete the suspended incarceration period of the sentence **before** becoming eligible for parole consideration. The inmate has a projected sentence completion of «DATE_1». If the inmate's status changes and becomes eligible for parole consideration before completing the incarceration period of the sentence, our office will notify you of the parole hearing.

It is your responsibility to register with the South Carolina Department of Corrections. The SC Department of Corrections notifies registered victims in the event of releases and escapes. The telephone number for the Division of Victim Services at the SC Department of Corrections is (803) 896-1733 in the Columbia area or toll free, 1-800-835-0304. The SC Attorney General's Office notifies victims of all State Appeals filed regarding the conviction. The toll free telephone number for the Attorney General's office is 1-800-213-5652. It is your responsibility to keep SCDC and the SC Attorney General's Office informed of any mailing address or phone number changes.

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«Attn__»
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Re: «Inmate_Name», SCDC#«SCDC»

Dear «Salutation»:

This letter is to acknowledge the receipt of your victim registration form in our office. We have registered you in the case of «Inmate_Name», SCDC#«SCDC». Our office notifies registered victims of parole hearings and any subsequent release to parole or community supervision. However, current records reflect this inmate is not eligible for parole consideration. **It is your responsibility to keep us informed if your mailing address or telephone number changes.**

It is your responsibility to register with the South Carolina Department of Corrections. The SC Department of Corrections notifies registered victims in the event of releases and escapes. The telephone number for the Division of Victim Services at the SC Department of Corrections is (803) 896-1733 in the Columbia area or toll free, 1-800-835-0304. The SC Attorney General's Office notifies victims of all State Appeals filed regarding the conviction. The toll free telephone number for the Attorney General's office is 1-800-213-5652. It is your responsibility to keep SCDC and the SC Attorney General's Office informed of any mailing address or phone number changes.

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Re: «Inmate_Name», SCDC#«SCDC»

Dear «Salutation»:

This letter is to acknowledge the receipt of your victim registration form in our office. We have registered you in the case of «Inmate_Name», SCDC#«SCDC». Our office notifies registered victims of parole hearings and any subsequent release to parole or community supervision. However, current records reflect this inmate is not eligible for parole consideration. If the status of the inmate changes and he/she becomes eligible for parole, we will notify you of the parole hearing. If, after the completion of 85% of the sentence the inmate becomes eligible for community supervision, we will notify you. **It is your responsibility to keep us informed if you mailing address or telephone number changes.**

It is your responsibility to register with the South Carolina Department of Corrections. The SC Department of Corrections notifies registered victims in the event of releases and escapes. The telephone number for the Division of Victim Services at the SC Department of Corrections is 803-896-1733 in the Columbia area or toll free, 1-800-835-0304. The SC Attorney General's Office notified victims of all State Appeals filed regarding the conviction. The toll free number for the Attorney General's office is 1-800-213-5652. It is your responsibility to keep SCDC and the Attorney General's Office informed of any mailing or phone number changes.

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September 21, 2021

«Victim_Name»
«Attn_»
«Street_Address»
«CityZip»

Re: «Inmate_Name», SCDC#«SCDC»

Dear «Salutation»:

This letter is to acknowledge the receipt of your victim registration form in our office. We have registered you in the case of «Inmate_Name», SCDC#«SCDC». Our office notifies registered victims of the administrative review of an inmate's case prior to the inmate's release. **It is your responsibility to keep us informed if your mailing address or telephone number changes.**

It is your responsibility to register with the South Carolina Department of Corrections. The SC Department of Corrections notifies registered victims in the event of releases and escapes. The telephone number for the Division of Victim Services at the SC Department of Corrections is (803) 896-1733 in the Columbia area or toll free, 1-800-835-0304. The SC Attorney General's Office notifies victims of all State Appeals filed regarding the conviction. The toll free telephone number for the Attorney General's office is 1-800-213-5652. It is your responsibility to keep SCDC and the SC Attorney General's Office informed of any mailing address or phone number changes.

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