

NOTICE OF RIGHT TO PRELIMINARY HEARING

STATE OF SOUTH CAROLINA

) UNIFORM WARRANT NUMBERS:

) 1. _____ 3. _____ 5. _____

COUNTY OF _____

) 2. _____ 4. _____ 6. _____

Mr./Ms., _____ you are charged with _____

_____ and you may be entitled to a Preliminary Hearing. You must request a Preliminary Hearing within ten (10) days of this notice or lose your right to such a hearing. You may request such hearing by completing the lower left section of this notice and returning it to the Court either in person or by mail to the following address:

I request a Preliminary Hearing.

NOTICE GIVEN BY:

Defendant: _____

Address: _____

Judge _____

Date _____

My Attorney is: _____

FOR COURT USE ONLY:

Date Request Received: _____

By: _____