STATE OF SOUTH CAROLINA CITY/COUNTY OF) IN THE MAGISTRATE/MUNICIPAL COURT) OF THE CITY/COUNTY OF
) or the cirr/countror
CITY/COUNTY OF	
v.) AFFIDAVIT/CERTIFICATION OF GUILTY PLEA) (In Re: Summary Court Pleas, Sup. Ct. Order 5/7/2020) Ticket/Warrant No.
DEFENDANT	
I,	_, SWEAR, AFFIRM OR CERTIFY THE FOLLOWING:
1. I am the Defendant in this crimin	
2. I am not under the influence of a	any medication, drugs or alcohol.
3. I am not mentally ill or mentally	incompetent.
4. I am represented in this matter b	y an attorney who has explained to me and advised me concerning this
agreement to plead guilty by affidavit/o	certification without a hearing before the court. My attorney is
5. I understand that I have the follow	wing constitutional rights listed below and I further understand that by my
plea I will waive, forfeit and/or give-up the	following constitutional rights:
a. The right to remain silen	at. I understand that I cannot be compelled to testify against myself.
b. The right to a jury trial ar	nd the right to have a jury of six (6) citizens of the City/County of
decide w	whether I am guilty beyond a reasonable doubt of the charge(s) pending
against me. I understand that the jury would	have to base their decision upon evidence which the City / County
presents and any evidence that I would wish	to introduce. I understand that at trial I would be presumed innocent and
the City / County would have to prod	duce evidence that would convince all six (6) members of the jury of my
guilt beyond a reasonable doubt.	
c. I understand that at trial	I would have the right to confront and be confronted by the witnesses
against me, that is, the right to see, hear and	cross-examine any witnesses called against me and the right to subpoena
and call witnesses on my own behalf.	
6. My attorney,	, has explained and I understand the nature and elements of
the charge(s) against me and of the potentia	al penalties and consequences of my plea.
7. My attorney,	, has explained and I understand that entering a plea of
guilty by this affidavit waives any further h	earing(s) on the charges.
8. I understand that by my plea I wil	I waive, forfeit and/or give-up any defense(s) I may have to the charge(s).
I also understand that by my plea I will waiv	e, forfeit and/or give-up the right to contest or challenge the admissibility
of any statement(s) that I may be alleged to	have made.
SCCA/656 (5/2020)	

9. I understand that I am entering a plea of guilty by this agreement on an emergency basis during the
COVID-19 pandemic and that my ability to enter a guilty plea by affidavit/certification rather than during a cour
hearing is only available while the Order of the Supreme Court authorizing a plea of guilty by affidavit/certification
dated May 7, 2020, remains in effect.
10. I hereby enter a plea of guilty to the charge of I understand that either
1) my attorney and the prosecutor/a law enforcement officer authorized to prosecute this matter have agreed that the
recommended sentence will not result in jail time, or 2) a penalty for the charge pending against me does not include a
possibility of jail time. I further understand that the prosecutor/a law enforcement officer authorized to prosecute this
matter will recommend the following sentence:, to be paid to the
Municipal / Magistrate Court. I also understand that, as a result of my plea
to the above charge, my charge for, Ticket/Warrant No, will be dismissed.
further understand that my presence in court will not be required to enter this plea; that, by my authorization, I will be
found guilty of
11. I understand that my guilty plea can be used to impose higher, enhanced penalties for committing ar
offense in the future, and can include collateral consequences (i.e. suspension of driver's license).
12. I have not been promised anything except the above plea agreement. I also state that I have not been
threatened, forced or coerced into entering into this plea agreement.
13. I have reviewed this matter completely with my attorney and am satisfied in the manner in which my
attorney has advised and represented me.
BY SIGNING BELOW, I understand, accept and agree to the terms, statements and conditions contained in this
Affidavit/Certification of Guilty Plea.
Defendant
SWORN to and subscribed before me
This, 20
Notary Public for South Carolina My commission expires:
In light of the coronavirus emergency, the following certification may be used in place of appearing before a
notary:

I certify that the foregoing statements made by me are t made by me are willfully false, I am subject to punishm	
	Signature
	Print or Type Name
Date:	

STATE OF SOUTH CAROLINA CITY/COUNTY OF) IN THE MAGISTRATE/MUNICIPAL COURT) OF THE CITY/COUNTY OF
V. DEFENDANT)) AFFIDAVIT/CERTIFICATION OF GUILTY PLEA) (In Re: Summary Court Pleas, Sup. Ct. Order 5/7/2020)) Ticket/Warrant No.))
STATE OF SOUTH CAROLINA) COUNTY OF)	DEFENSE AFFIDAVIT/CERTIFICATION (In Re: Summary Court Pleas, Sup. Ct. Order)
I,, an attorne	ey licensed to practice in the state of South Carolina, acknowledge and
affirm or certify that I represent the above-nar	med defendant in this action, that I have explained to the defendant
-	ed to the defendant and believe that defendant understands that signing
	ghts explained, and that I have explained to the defendant that the
•	ed and agreed to the recommended sentence to be imposed upon
SWORN to and subscribed before me This day of, 20	(Name) (Firm) (Address)
Notary Public for South Carolina My commission expires:	
In light of the coronavirus emergency, the follonotary:	owing certification may be used in place of appearing before a
I certify that the foregoing statements statements made by me are willfully false, I an	made by me are true. I am aware that if any of the foregoing m subject to punishment by contempt.
	Signature
	Print or Type Name
D	Time of Type Italie
Date:	

STATE OF SOUTH CAROLINA CITY/COUNTY OF) IN THE MAGISTRATE/MUNICIPAL COURT) OF THE CITY/COUNTY OF
CITY/COUNTY OF v. DEFENDANT) AFFIDAVIT/CERTIFICATION OF GUILTY PLEA) (In Re: Summary Court Pleas, Sup. Ct. Order 5/7/2020) Ticket/Warrant No.)
STATE OF SOUTH CAROLINA) COUNTY OF)	PROSECUTION AFFIDAVIT/CERTIFICATION (In Re: Summary Court Pleas, Sup. Ct. Order)
I,, an attorne	ey licensed to practice in the state of South Carolina/a law enforcement
officer authorized to prosecute this matter, ackn	nowledge, affirm and/or certify that I represent the \(\subseteq \text{City} / \subseteq \text{County} \)
in this action, that I have complied with the V	ictims' Bill of Rights pursuant to Article I, Section 24 of the South
Carolina Constitution, and that the attorney for	the defendant in this action and I have discussed and the defendant,
upon advice of his/her attorney, has agreed to the	ne recommended sentence to be imposed upon defendant's guilty plea,
which shall not include jail time.	
SWORN to and subscribed before me This day of, 20	(Name) (Firm) (Address)
Notary Public for South Carolina My commission expires:	
In light of the coronavirus emergency, the follonotary:	owing certification may be used in place of appearing before a
I certify that the foregoing statements is statements made by me are willfully false, I am	made by me are true. I am aware that if any of the foregoing a subject to punishment by contempt.
	Signature
Date:	Print or Type Name