

Mamie Greene (C028602)

✓ Completed
MP
2/6/2024

From: Franshon Miller (C066394)
Sent: Monday, February 5, 2024 9:02 AM
To: [REDACTED] Classification
Cc: Classification Branch Chiefs; Vicky Lindler (C056368)
Subject: Richard Murdaugh 390394
Attachments: Richard Murdaugh 390394.pdf

Good morning. Please see attached. This request is for all disciplinaries and incident reports. Please email documents directly to me.

Respectfully,

Franshon Dennis
Record Analyst II
Inmate Records
P. 803-896-1978
Miller.Franshon@doc.sc.gov

COURTESY OF
LUNA SHARK MEDIA

Date: 2/5/2024

Copies are needed for the following Warden's Record:

Inmate Name Richard Murdaugh SCDC # 390394

Copies are needed on or before ASAP

Information needed:

1. Copies of entire record _____
2. Copies of dates from disciplinaries to incident reports

Once copies are completed, please place in an inter-office envelope with the following cover sheet placed on the outside of the envelope.

1. Hand carry to Vicky Lindler @ Inmate Records Office
2. Inmate's name and SCDC #
3. Name of your institution
4. And date copies are sent

Please check copies before sending to ensure that they are:

Legible

Neat

Darken

Not chopped or cut off

And in the same order as the record

Please no:

No front and back copies

No two hole punches

No staples and

No long sheets (Please unfold long sheets reduce to 78% or use auto on copier)

Thank you,

Vicky Lindler, Supervisor
Records Management Area
Inmate Records Office


Lindler.vicky@doc.sc.gov

**SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
INCIDENT REPORT**

Institution/Center: [REDACTED] Correctional Institution.				Date of Report: 10/05/2023.
Reporting Official (Full Name): Sgt. Tillman.				Time of Report: Approx. 2:06PM.
Employee ID #: 056708.				Date of Incident: 10/05/2023.
Location of Incident: RHU Side-A, RM:99-A.				Time of Incident: Approx. 1:50PM.
Inmate(s)/Resident:	SCDC #	Age:	Sex:	Race:
1. Richard Murdaugh.	390394		M.	W.
2.				
3.				
4.				
5.				
				Employee(s)/Witnesses Involved:
				1. Agency Search Team. (AST)
				2.
				3.
				4.
				5.

On the above date and approximate time:

I, Sgt. Tillman #056708 along with members from the Agency Search Team conducted a cell search of RHU, Side A, RM:99-A that houses Inmate Richard Murdaugh #390394. During the search excessive pens and sticky notes were found in the cell. I Sgt. Tillman took possession of the contraband. Inmate Murdaugh will be charged accordingly. The contraband was then bagged and labeled with proper information.
End of Report.

Signature: *[Handwritten Signature]* Title: *[Handwritten Title]*

Evidence: *S-23 attached*

Disposition of Evidence: *turned over to contraband.*

Supervisor's Comments: <i>817</i>	STG Related - Refer to STG Committee <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Printed Name: <i>Lt. A. Brown</i>	This incident is DRUG related <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Signature: <i>A. Brown</i> Title: <i>Lt</i> Date/Time: <i>@ 2:10pm 10/5/23</i>	<p align="center">Responsible Authority</p> <p align="center">Action Taken</p> <input type="checkbox"/> Informal Resolution <input type="checkbox"/> Administrative Resolution <input type="checkbox"/> Refer to Disciplinary Hearing
Major/Responsible Authority: <i>817</i>	
Printed Name: <i>S. Terry</i>	
Signature: <i>S. Terry</i> Title: <i>Master</i> Date/Time: <i>10/6/23 10AM</i>	

CASE NO.: 497-23

**South Carolina Department of Corrections
CONTRABAND/EVIDENCE CHAIN OF CUSTODY**

Date/Time Contraband/Evidence Found 10/05/2023 @ 2:06PM.

Institution CI, RHU, Side A- RM: 99-A.

Contraband/Evidence Description/Specific Location Evidence Found
(Weighted items will be described with approximate field weights.)

Item #	Description of Evidence	Location Found
1	Excessive pens.	In Cell.
2	Sticky notes.	In Cell.

Suspect(s) Name Richard Murdaugh SCDC # 390394
SCDC # _____
SCDC # _____
Victim (s) Name _____ SCDC # _____
SCDC # _____

Contraband/Evidence Recovered by: Sgt. Tillman [Signature]
TITLE PRINTED NAME SIGNATURE

SUBSEQUENT CUSTODY


Date	Time	Transferred by (print name and SCDC #)	Transferred to (print name and SCDC #)	Reason for Transfer	Item #	Receiving Party Signature
10/05/2023	2:06PM.	Sgt. Tillman. #056708. Ofc. Ables #044179.	Ofc. Ables #044179. <u>L. Tillman</u>	Evidence. <u>evidence</u>	1,2 <u>1-2</u>	<u>[Signature]</u>

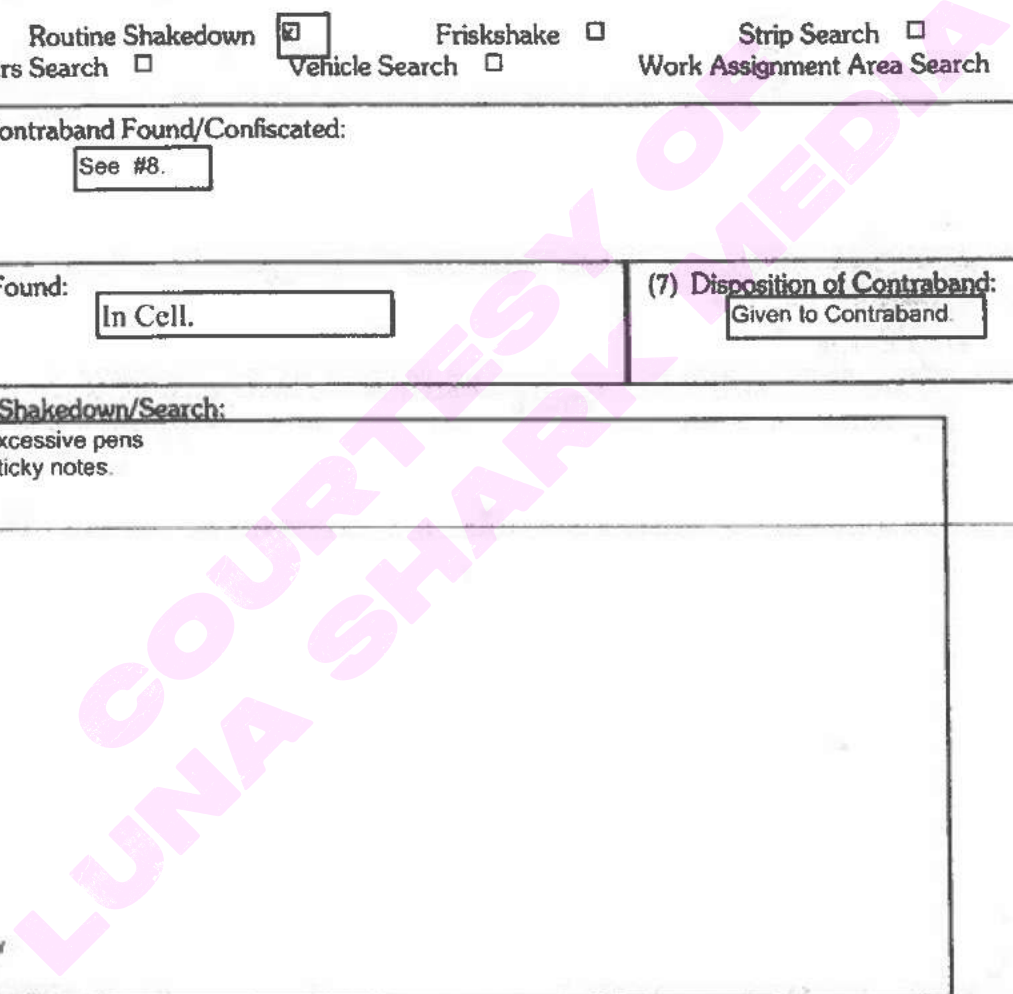
FINAL DISPOSITION IF RETAINED AT INSTITUTION

Date Destroyed _____
Witness _____
PRINT NAME/TITLE SIGNATURE

Method of Destruction _____
Witness _____
PRINT NAME/TITLE SIGNATURE

**SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
SHAKEDOWN / SEARCH REPORT**

(1) Officer(s) Conducting Shakedown	Date
Sgt. Tillman #056708.	10/05/2023.
(2) Inmate(s) / Vehicle(s) and/or Area Being Searched	
Richard Murdaugh #390394. [REDACTED] CI. RHU, Side A. RM: 99-A.	
(3) Reason for Shakedown / Search:	
Routine <input checked="" type="checkbox"/> Suspicious of Contraband Possession <input type="checkbox"/> Return from Work Detail/Recreation Outing <input type="checkbox"/> Other <input type="checkbox"/>	
(4) Type of Shakedown / Search:	
Routine Shakedown <input checked="" type="checkbox"/> Friskshake <input type="checkbox"/> Strip Search <input type="checkbox"/> Quarters Search <input type="checkbox"/> Vehicle Search <input type="checkbox"/> Work Assignment Area Search <input type="checkbox"/>	
(5) Items of Contraband Found/Confiscated:	
See #8.	
(6) Location Found:	(7) Disposition of Contraband:
In Cell.	Given to Contraband.
(8) Details of Shakedown/Search:	
<ul style="list-style-type: none"> * Excessive pens * Sticky notes. 	
(9) Officer(s) Signature	Date:
	10/05/2023
(10) Shift Supervisor's Signature	Date:
(11) Supervisor's Signature	Date:
(12) Deputy Warden's Signature	Date:





Post-it

notes | feuillets | notas

100 TOTAL/CONT. 100
3 IN/PO/PULG x 3 IN/PO/PULG (76 mm x 76 mm) 3M

9/19

DHO 03
MH-5
PC
edu-none

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
INCIDENT REPORT

F545

Institution/Center	██████████	Correctional Institution	Date of Report: Aug 24th, 2023 (Disc)
Reporting Official (Full Name):	Warden Palmer		Time of Report: Approx 4:15 PM
Employee ID #:	050210		Date of Incident: Aug 21st, 2023
Location of Incident:	McCormick		Time of Incident: Approx 3:39 PM
Inmate(s)/Resident	SCDC #	Age:	Sex:
1. Hazlett, Jacob	381849		
2. Murdaugh, Richard	390394		
3.			
4.			
5.			

On the above date and approximate time:

Date of Discovery 8-24-23

I, Warden Palmer, was reviewing phone calls and found a call to 803-██████████ on 8-21-23 made by inmate Jacob Hazlett 381849. In the call inmate Hazlett states "This is a friend of As. He asked me to give you a call. He says his phone privileges have been taken and he wants you to let J (Jim Griffin) know his hearing is Wednesday." He further states that he (Murdaugh) wants J to send a letter so that it can be entered into the record for the hearing. The call concludes with inmate Hazlett stating "He also asks for \$150 on his account." The female states to let him know she will take care of it. There is a second call on 8-22-23 to the same number. Inmate Hazlett again is delivering a message for inmate Murdaugh regarding a letter from his attorney for an upcoming DHO hearing.

Signature: *[Signature]* Title: Warden

Evidence:

Disposition of Evidence:

Supervisor's Comments:	STG Related - Refer to STG Committee
Refer to Major	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
Printed Name: <i>B. Bull</i>	This incident is DRUG related
Signature: <i>[Signature]</i> Title: <i>Capt</i> Date/Time: <i>8-25-23 4:25pm</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
Major/Responsible Authority:	Responsible Authority
847 - Abuse of Privileges for both inmates	Action Taken
Printed Name: <i>Robertson</i> Date/Time: <i>8-28-23</i>	<input checked="" type="checkbox"/> Informal Resolution
Signature: <i>[Signature]</i> Title: <i>A/W</i> Date/Time: <i>8:25Am</i>	<input type="checkbox"/> Administrative Resolution
	<input type="checkbox"/> Refer to Disciplinary Hearing

DIS1100D

SCDC OFFENDER MANAGEMENT SYSTEM
DISCIPLINARY SYSTEM

09/07/23
C048398

SCDC ID: 390394

DISPLAY INMATE OFFENSE HISTORY

MURDAUGH, RICHARD ALEXANDER

CURR LOC: [REDACTED]

LEGAL NAME:

PURCHASED TV Y

OFFENDER TYPE: ADULT-STRAIGHT

SERIOUS MENTAL ILLNESS: N

TABLET ELIG: Y

CASE#	OFFENSE DESCRIPTION	TYPE ACTION	OFFENSE DATE	HEARING DATE	NET GT LOST	DHO DECISION	OFF LVL
00003	ABUSE OF PRIVILEGES	ADMINIST	08/24/23	/ /	00000		5
00001	ABUSE OF PRIVILEGES	MAJOR DI	08/15/23	08/28/23	00000	CONVICTED	5
00002	UNAUTHORIZED USE OF A	MAJOR DI	08/09/23	08/28/23	00000	CONVICTED	3

END OF LIST

PAGE 0001

SELECT A RECORD AND PRESS <ENTER> TO DISPLAY OR <PF04> TO MODIFY

PF4-MODIFY PF6-DISMISSED/NOT GUILTY

PF11-QUIT PF10-MAIN MENU

COURTESY OF LUNA SHARK MEDIA

CLAI630D

SCDC OFFENDER MANAGEMENT SYSTEM
DIV OF MEDICAL AND HEALTH SERVICES

09/07/23
C048398

.SCDC#> 00390394

SUMMARY OF RESTRICTIONS

NAME.: MURDAUGH, RICHARD ALEXANDER

LOCATION...: [REDACTED]

MED CLASS.: MED PROB/NO WORK RESTRICT

MENTAL...: MH-5

RESTRICT TYPE	RESTRICTION	DATE	ACTIVE	USERID
WORK RESTRICTIONS	NO MEDICAL RESTRICTION	03/09/23	Y	C067186
TRANSPORTATION RESTRICTIO	NO RESTRICTION	03/09/23	Y	C067186
MED CLASS DURATION	NO RESTRICTIONS	03/09/23	Y	C067186
INSTITUTIONAL RESTRICTION	NO RESTRICTION	03/09/23	Y	C067186
CELL RESTRICTIONS	NO RESTRICTION	03/09/23	Y	C067186
*** END OF LIST				

RESTRICTIONS DISPLAYED...

CLEAR=> RETURN

PF5=NON ACTIVE

PF9=HEALTH SUMMARY

COURTESY OF
LUNA SHARK MEDIA

CMT1330D
OMCOMITA

SCDC OFFENDER MANAGEMENT SYSTEM
RELEASE DATE SCREEN

09/07/23
C048398

SCDC# > 390394

LOC: [REDACTED]

MURDAUGH, RICHARD ALEXANDER

SCDC CLASSIFICATION...: VIOLENT

LEGAL NAME:

SEXUAL REGISTRY...: N

OFFENDER TYPE...: ADULT-STRAIGHT SENTENCE

SEXUAL PREDATOR...: NOT APP

TABLET ELIGIBLE...: Y

DNA STATUS...: COMPLETED

GPS REQUIREMENT...: N

PREA DECISION...:

PREA PERP...:

PREA VICTIM...: MEDIUM

CURRENT SENTENCE:

CONSECUTIVE SENTENCE ...:

LIFE

CURRENT SENT START DATE: 07/20/2022

PROJECTED COMPLETION DATES

MAXOUT DATE: 99/99/9999

CURRENT EWC ..:

YOA SIX YEAR DATE:

CURRENT EEC ..:

INITIAL PAROLE DATE: 00/00/0000

NEXT PAROLE HEARING DATE: 00/00/0000

TOTAL GT DAYS EARNED: 000000

LABOR CREW/WORK PROG DATE: 99/99/9999

TOTAL EARNED WORK CREDITS ..: 000000

LABOR CREW DISQ REASON:

TOTAL EDUCATION CREDITS: 000000

CATEGORY 4 OR 5 OFFENSE

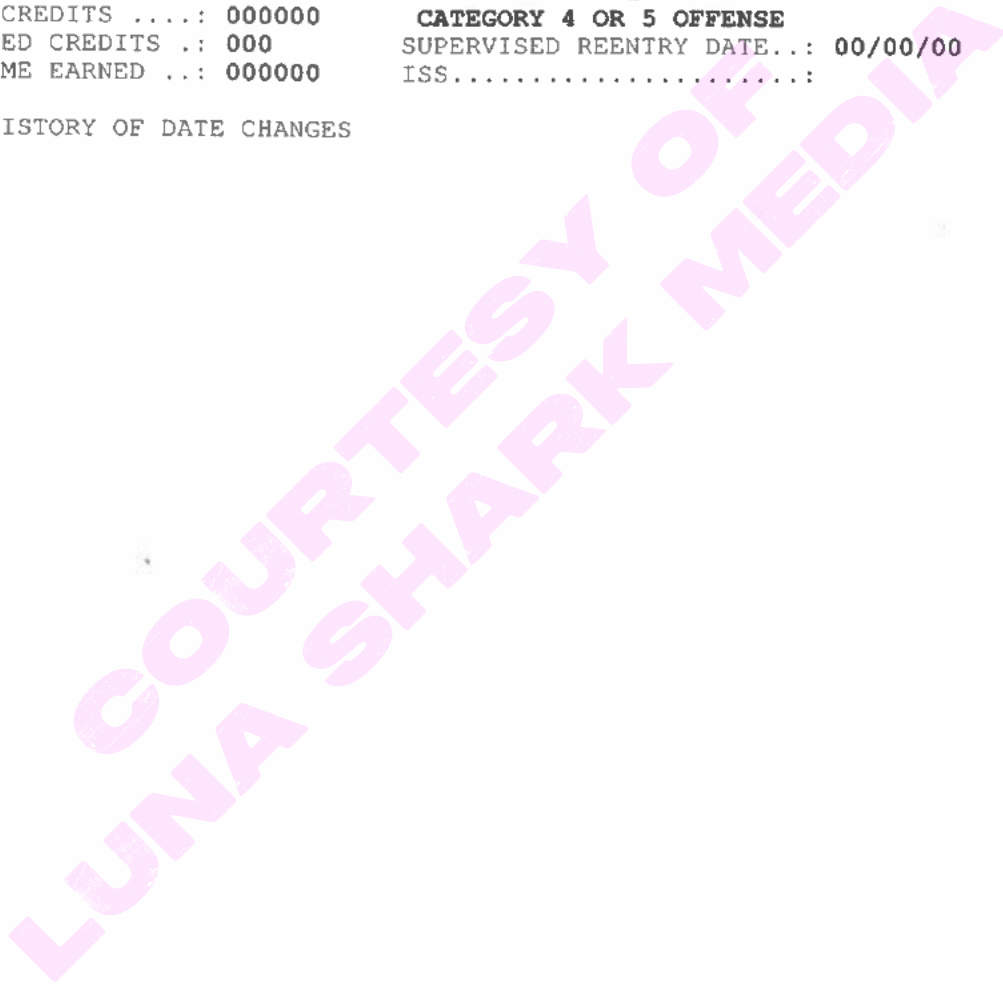
TOTAL EXTRA EARNED CREDITS .: 000

SUPERVISED REENTRY DATE...: 00/00/00

TOTAL SERVICE TIME EARNED ...: 000000

ISS.....:

PFKEYS: 5:HISTORY OF DATE CHANGES



Enrollment	Assessments	HS	WorkKeys	ESC	DOL	VOC	OJT	PD	Archived
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Assessments

None.

COURTESY OF
LUNA SHARK MEDIA

A-45

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
INMATE DISCIPLINARY SYSTEM
INFORMAL RESOLUTION/ADMINISTRATIVE RESOLUTION

Inmate Name: <u>Richard Murdaugh</u>	Inmate SCDC Number: <u>390399</u>
Number/Type of Violation: (SCDC Form 19-29, "Incident Report" attached) <u>817</u>	
Date of Violation: <u>10/5/23</u>	Institution: <u>MCCT</u>

I find the inmate committed the charge(s) specified, offer the inmate the option to resolve the violation (place check in appropriate box)

INFORMALLY **ADMINISTRATIVELY**

and impose the following sanction(s):

Sanction	Number of hours/days of sanction or amount of restitution
Personal television for 20 days (Check box if imposing this sanction)	<input type="checkbox"/>
Counseling (Check box if imposing this sanction)	<input type="checkbox"/>
Instructions or directives (Check box if imposing this sanction)	<input type="checkbox"/>
Verbal reprimand (Check box if imposing this sanction)	<input type="checkbox"/>
Extra duty or chores up to 40 hours	Hours
Restriction of recreation time (general population only) up to 10 days	Days
Restriction of canteen, visitation, or other privileges up to 20 days	Days
Restriction of television viewing and/or radio up to 20 days	Days
Payment of restitution	\$
Cell restriction up to 10 days	Days
ADMINISTRATIVE RESOLUTION ONLY: RHU up to ten (10) days	Days
ADMINISTRATIVE RESOLUTION ONLY: Failure to earn good time	Days

Adrian Craft Major/Responsible Authority (Print Name)
 Mc Institution
 [Signature] Signature
 10/9/23 Date

OTHER DISPOSITION: Not Guilty Dismissed Referred to MHDTT (NGMI/GMI)

INMATE'S ACCEPTANCE OF INFORMAL OR ADMINISTRATIVE RESOLUTION:

This is to certify that I, Richard Murdaugh, understand that as a result of the above incident, I have been offered the option to resolve the violation (place check in appropriate box)

INFORMALLY **ADMINISTRATIVELY**

Yes, I accept the sanctions listed above. I understand that I have the privilege of requesting this case be referred to a disciplinary hearing, and I waive that privilege. I further agree that by accepting this informal or administrative resolution, I waive all appeals, including those pursuant to Al-Shabazz v. State.

No, I do not want to accept the sanctions listed above and request that this case be referred to a disciplinary hearing.

10/9/23
Date

S/ [Signature]
Inmate's Signature

White: Central Records Green: Institutional Records Goldenrod: Inmate cc: **Financial Accounting (forward copy only when restitution is to be paid)

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS

DISCIPLINARY REPORT AND HEARING RECORD

Case#: 03 Inmate Name: MURDAUGH RICHARD SCDC#: 390394
 Living Area: F5-45 Job: N/A Custody: PC
 Offense Date: 8/21/2023 Offense Time: 03:39 AM PM Institution: [REDACTED] Correctional Institution: [REDACTED]

Offense Description:
 847 Abuse of Privileges: The willful violation by an inmate of any provision of an institutional regulation dealing with a privilege. A privilege as used in this subsection is any benefit provided by institutional, SCDC, contracted services, or another governmental agency's regulations.

Charging Officer/Employee: J PALMER Title: WARDEN

INMATE NOTIFICATION: YOU WILL APPEAR BEFORE A HEARING OFFICER 48 HOURS OR MORE AFTER YOUR RECEIPT OF THIS NOTICE. YOU HAVE THE RIGHT TO SUBMIT A WRITTEN STATEMENT AND MAKE A VERBAL STATEMENT.

I GIVE UP MY RIGHT TO 48-HOUR NOTICE AND AUTHORIZE THE HEARING OFFICER TO PROCEED WITH THE HEARING
 I DO NOT WANT TO BE PRESENT AT MY HEARING RHM/GPH SEGREGATION ONLY
 I DO WANT MY ACCUSER PRESENT AT MY HEARING I WANT A COUNSEL SUBSTITUTE
 I DO NOT WANT MY ACCUSER PRESENT AT MY HEARING I DO NOT WANT A COUNSEL SUBSTITUTE

Date & Time Notified: 9/8/23 11:30 AM By (Print): J Palmer
 Inmate Signature: [Signature] SCDC#: 390394 Date: 9/8/23

HEARING INFORMATION:
 Hearing Date: 9/15/23 Hearing Time: 9:00 AM Modclass: MH-5 [REDACTED]

DD: Assigned Counsel Substitute: [Signature]

EXPLAIN BELOW BY NUMBER: (1) IF COUNSEL SUBSTITUTE WAS NOT PRESENT DURING PART OF THE HEARING; (2) IF ACCUSED WAS EXCLUDED FROM ANY PART OF THE EVIDENCE STAGE, IF ANY (3) WITNESSES, (4) DOCUMENTATION, OR (5) EVIDENCE WAS EXCLUDED FROM THE HEARING; (6) IF INMATE WAS DENIED CONFRONTATION QUESTIONING AND/OR CROSS EXAMINATION OF A WITNESS AT THE HEARING OR (7) IF HEARING WAS DELAYED.

OFFENSE CODES	847	
INMATE PLEA (G, NG, None)	NG	
FINDINGS (G, NG, DS) (NGMI) (GMI)	G	

IF GUILTY, EVIDENCE PRESENTED CONSIDERED AND REASONS FOR DETERMINATION OF GUILT: (A) ADMISSION OF GUILT; (B) OFFICER'S REPORT; (C) WITNESS TESTIMONY; (D) OTHER. EXPLAIN IN DETAIL:

SANCTIONS:
 Loss of Privileges (Days): _____ Reprimand: _____ Loss of Good Time (Days): _____
 Property (Days): _____ Extra Duty (Hours): _____ Restitution: \$ _____
 Canteen (Days): _____ Visit Suspension (Days): _____ Cell Restriction (Days): _____
 Disciplinary Detention (Days): 15 days Phone (Days): 7 days Other: _____ (Days): _____

SPECIFIC FACTUAL REASON(S) FOR PARTICULAR PUNISHMENT IMPOSED:

CREDIT FOR PHD TIME SERVED? YES NO IF YES, DAYS: _____
 DATE INMATE PLACED IN PHD: _____ DATE INMATE RELEASED FROM PHD: 9/15/23
 INMATE SIGNATURE FOR RECEIPT OF FINAL REPORT: [Signature] DATE: 9/15/23

HEARING OFFICER (PRINT NAME): [Signature] X [Signature]
 APPROVED/DD MODIFICATION ONLY: [Signature] WARDEN REASON: _____
 CONTACT YOUR CLASSIFICATION CASEWORKER OR COUNSEL SUBSTITUTE IF YOU DO NOT UNDERSTAND THIS FORM.

White - Institutional Record Cream - Inmate (Service of Disciplinary Report) Golden Rod - Inmate (Service of Disciplinary Hearing Disposition) Pink - Central Record

UNO 01108
 MTH-5
 PC.
 edu- none

FS-45

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
 INCIDENT REPORT

Institution/Center: [REDACTED] Correctional Institution		Date of Report: Aug 15th, 2023 (Disc)
Reporting Official (Full Name): Warden Palmer		Time of Report: Approx 9:30 AM
Employee ID #: 050210		Date of Incident: Aug 15th, 2023
Location of Incident: McCormick		Time of Incident: Approx 8:00 AM
Inmate(s)/Resident:	SCDC #	Age:
		Sex:
		Race:
Employee(s)/Witnesses Involved:		
1. Murdaugh Richard	390394	1.
2.		2.
3.		3.
4.		4.
5.		5.

On the above date and approximate time:

On August 15th, 2023 (Discovery) I, Warden Palmer, received a report from the Office of the Inspector General regarding an interview conducted on August 9th, 2023 at approximately 1:30 PM by the Inspector General regarding reports that inmate Richard Murdaugh 390394 participated in an interview with Fox Nation for an upcoming documentary entitled "The Fall of the House of Murdaugh." During the interview inmate Murdaugh's attorney, Jim Griffin, stated he conducted an interview for the news media which he recorded and provided to the production company. Inmate Murdaugh willingly and knowingly abused his telephone privileges to communicate with the news media for his own gain.

Signature: *[Signature]* Title: Warden

Evidence:

Disposition of Evidence:

Supervisor's Comments:	STG Related - Refer to STG Committee
Refer to Major	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
Printed Name: Robertson	This incident is DRUG related
Signature: <i>[Signature]</i> Title: AA Date/Time: 10:00AM 8-15-23	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
Major/Responsible Authority:	Responsible Authority
847 - Abuse of Privileges	Action Taken
Printed Name: S. Terry	<input type="checkbox"/> Informal Resolution
Signature: <i>[Signature]</i> Title: <i>[Signature]</i> Date/Time: 8/15/23 10:05am	<input checked="" type="checkbox"/> Administrative Resolution
	<input type="checkbox"/> Refer to Disciplinary Hearing

**SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
INCIDENT REPORT**

Institution/Center: [REDACTED] Correctional Institution		Date of Report: Aug 14th, 2023 (Disc)
Reporting Official (Full Name): Warden Palmer		Time of Report: 12:15 PM
Employee ID #: 050210		Date of Incident: Aug 9th, 2023
Location of Incident: McCormick		Time of Incident: Approx 2:25 PM
Inmate(s)/Resident:	SCDC #	Age:
		Sex:
		Race:
Employee(s)/Witnesses Involved:		
1. Murdaugh, Richard	390394	1.
2. Kelly, Joshua	385438	2.
3.		3.
4.		4.
5.		5.

On the above date and approximate time:

I, Warden Palmer, was reviewing phone calls on 8-14-23 (Discovery). On 8-9-23 at approximately 2:25 PM a call was made to 803 [REDACTED] by inmate Joshua Kelly's 385438 pin number. On the call I recognized the voice of Richard Murdaugh 390394. Inmate Murdaugh stated he is using someone else's pin number because his is not working.

Signature: *[Signature]* Title: Warden

Evidence:

Disposition of Evidence:

Supervisor's Comments:	STG Related - Refer to STG Committee
Refer to Major	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
Printed Name: B. B. Bibb, Capt	This incident is DRUG related
Signature: <i>[Signature]</i> Title: Capt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
Date/Time: 8-14-23 12:30pm	
Major/Responsible Authority:	Responsible Authority
853	Action Taken
Printed Name: S. Terry	<input type="checkbox"/> Informal Resolution
Signature: <i>[Signature]</i> Title: Major	<input checked="" type="checkbox"/> Administrative Resolution
Date/Time: 8/14/23 12:35pm	<input type="checkbox"/> Refer to Disciplinary Hearing

DISI100D

SCDC OFFENDER MANAGEMENT SYSTEM
DISCIPLINARY SYSTEM

08/17/23
C048398

SCDC ID: 390394

DISPLAY INMATE OFFENSE HISTORY

MURDAUGH, RICHARD ALEXANDER

CURR LOC: [REDACTED]

LEGAL NAME:

PURCHASED TV **Y**

OFFENDER TYPE: **ADULT-STRAIGHT**

SERIOUS MENTAL ILLNESS: **N**

TABLET ELIG: **Y**

CASE#	DESCRIPTION	TYPE	OFFENSE	HEARING	NET GT	DHO	OFF
		ACTION	DATE	DATE	LOST	DECISION	LVL
00001	ABUSE OF PRIVILEGES	MAJOR DI	08/15/23	/ /	00000		5
00002	UNAUTHORIZED USE OF A	MAJOR DI	08/09/23	/ /	00000		3

END OF LIST

PAGE 0001

SELECT A RECORD AND PRESS <ENTER> TO DISPLAY OR <PF04> TO MODIFY

PF4-MODIFY PF6-DISMISSED/NOT GUILTY

PF11-QUIT PF10-MAIN MENU

COURTESY OF LUNA SHARK MEDIA

CLAI630D

SCDC OFFENDER MANAGEMENT SYSTEM
DIV OF MEDICAL AND HEALTH SERVICES

08/17/23
C048398

SCDC#> 00390394

SUMMARY OF RESTRICTIONS

NAME.: MURDAUGH, RICHARD ALEXANDER

LOCATION...: [REDACTED]

MED CLASS.: MED PROB/NO WORK RESTRICT

MENTAL...: MH-5

RESTRICT TYPE	RESTRICTION	DATE	ACTIVE	USERID
WORK RESTRICTIONS	NO MEDICAL RESTRICTION	03/09/23	Y	C067186
TRANSPORTATION RESTRICTIO	NO RESTRICTION	03/09/23	Y	C067186
MED CLASS DURATION	NO RESTRICTIONS	03/09/23	Y	C067186
INSTITUTIONAL RESTRICTION	NO RESTRICTION	03/09/23	Y	C067186
CELL RESTRICTIONS	NO RESTRICTION	03/09/23	Y	C067186
*** END OF LIST				

RESTRICTIONS DISPLAYED...

CLEAR=> RETURN

PF5=NON ACTIVE

PF9=HEALTH SUMMARY

COURTESY OF
LUNA SHARK MEDIA

CMTI330D SCDC OFFENDER MANAGEMENT SYSTEM 08/17/23
OMCOMITA RELEASE DATE SCREEN C048398

SCDC# > 390394 LOC: [REDACTED]

MURDAUGH, RICHARD ALEXANDER SCDC CLASSIFICATION..: **VIOLENT**

LEGAL NAME: SEXUAL REGISTRY..: **N**

OFFENDER TYPE...: **ADULT-STRAIGHT SENTENCE** SEXUAL PREDATOR..: **NOT APP**

TABLET ELIGIBLE.: **Y** DNA STATUS.....: **COMPLETED**

GPS REQUIREMENT..: **N**

PREA DECISION.....:

PREA PERP..:

PREA VICTIM.....: **MEDIUM**

CURRENT SENTENCE: CONSECUTIVE SENTENCE ..:

LIFE CURRENT SENT START DATE: **07/20/2022**

PROJECTED COMPLETION DATES

MAXOUT DATE: **99/99/9999** CURRENT EWC ..:

YOA SIX YEAR DATE: CURRENT EEC ..:

INITIAL PAROLE DATE: **00/00/0000** NEXT PAROLE HEARING DATE: **00/00/0000**

TOTAL GT DAYS EARNED: **000000** LABOR CREW/WORK PROG DATE: **99/99/9999**

TOTAL EARNED WORK CREDITS ..: **000000** LABOR CREW DISQ REASON:

TOTAL EDUCATION CREDITS: **000000** **CATEGORY 4 OR 5 OFFENSE**

TOTAL EXTRA EARNED CREDITS ..: **000** SUPERVISED REENTRY DATE..: **00/00/00**

TOTAL SERVICE TIME EARNED ...: **000000** ISS.....:

PFKEYS: 5:HISTORY OF DATE CHANGES

COURTESY OF LUNA SHARK MEDIA

Enrollment	Assessments	HS	WorkKeys	ESC	DOL	VOC	OJT	PD	Archived
------------	-------------	----	----------	-----	-----	-----	-----	----	----------

Assessments

None.

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COURTESY OF
LUNA SHARK MEDIA

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
INMATE DISCIPLINARY SYSTEM
INFORMAL RESOLUTION/ADMINISTRATIVE RESOLUTION

AHS

Inmate Name: <u>Murdaugh Richard</u>	Inmate SCDC Number: <u>390394</u>
Number/Type of Violation: (SCDC Form 19-29, "Incident Report" attached) <u>847</u>	
Date of Violation: <u>8/15/23</u>	Institution: <u>GI</u>

I find the inmate committed the charge(s) specified, offer the inmate the option to resolve the violation (place check in appropriate box)

INFORMALLY ADMINISTRATIVELY

and impose the following sanction(s):

Sanction	Number of hours/days of sanction or amount of restitution
Personal television for 20 days (Check box if imposing this sanction)	<input type="checkbox"/>
Counseling (Check box if imposing this sanction)	<input type="checkbox"/>
Instructions or directives (Check box if imposing this sanction)	<input type="checkbox"/>
Verbal reprimand (Check box if imposing this sanction)	<input type="checkbox"/>
Extra duty or chores up to 40 hours	Hours
Restriction of recreation time (general population only) up to 10 days	Days
Restriction of canteen, visitation, or other privileges up to 20 days <u>Telephone</u>	<u>20</u> Days
Restriction of television viewing and/or radio up to 20 days	Days
Payment of restitution	\$
Cell restriction up to 10 days	Days
ADMINISTRATIVE RESOLUTION ONLY: RHU up to ten (10) days	Days
ADMINISTRATIVE RESOLUTION ONLY: Failure to earn good time	Days

Admin Capt Helin McComick [Signature] 8/15/23
 Major/Responsible Authority Institution Signature Date
 (Print Name)

OTHER DISPOSITION: ___ Not Guilty ___ Dismissed ___ Referred to MHD/TT (NGMI/GMI)

INMATE'S ACCEPTANCE OF INFORMAL OR ADMINISTRATIVE RESOLUTION:

This is to certify that I, Murdaugh Richard, understand that as a result of the above incident, I have been offered the option to resolve the violation (place check in appropriate box)

INFORMALLY ADMINISTRATIVELY

Yes, I accept the sanctions listed above. I understand that I have the privilege of requesting this case be referred to a disciplinary hearing, and I waive that privilege. I further agree that by accepting this informal or administrative resolution, I waive all appeals, including those pursuant to Al-Shabazz v. State.

No, I do not want to accept the sanctions listed above and request that this case be referred to a disciplinary hearing.

8/15/23 [Signature]
Date Inmate's Signature

White: Central Records Green: Institutional Records Goldenrod: Inmate cc: **Financial Accounting (forward copy only when restitution is to be paid)

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS

DISCIPLINARY REPORT AND HEARING RECORD

Case#: 01 Inmate Name: MURDAUGH RICHARD SCDC#: 390394
 Living Area: F5-45 Job: N/A Custody: PC
 Offense Date: 8/15/2023 Offense Time: 08:00 AM PM Institution: Correctional Institution

Offense Description:
 847 Abuse of Privileges: The willful violation by an inmate of any provision of an institutional regulation dealing with a privilege. A privilege as used in this subsection is any benefit provided by institutional, SCDC, contracted services, or another governmental agency's regulations.

Charging Officer/Employee: J PALMER Title: WARDEN

INMATE NOTIFICATION: YOU WILL APPEAR BEFORE A HEARING OFFICER 48 HOURS OR MORE AFTER YOUR RECEIPT OF THIS NOTICE. YOU HAVE THE RIGHT TO SUBMIT A WRITTEN STATEMENT AND MAKE A VERBAL STATEMENT.

I GIVE UP MY RIGHT TO 48-HOUR NOTICE AND AUTHORIZE THE HEARING OFFICER TO PROCEED WITH THE HEARING
 I DO NOT WANT TO BE PRESENT AT MY HEARING
 I DO WANT MY ACCUSER PRESENT AT MY HEARING
 I DO NOT WANT MY ACCUSER PRESENT AT MY HEARING

REH/CPH SEGREGATION ONLY
 I WANT A COUNSEL SUBSTITUTE
 I DO NOT WANT A COUNSEL SUBSTITUTE

Date & Time Notified: 8/21/23 12:24 AM/PM By (Print): [Signature] SCDC#: 390394 Date: 8/21/23

HEARING INFORMATION:
 Hearing Date: 8/28/23 Hearing Time: 11:56 am Medclass: MH-5
 DD: Assigned Counsel Substitute: [Signature]

EXPLAIN BELOW BY NUMBER: (1) IF COUNSEL SUBSTITUTE WAS NOT PRESENT DURING PART OF THE HEARING; (2) IF ACCUSED WAS EXCLUDED FROM ANY PART OF THE EVIDENCE STAGE; IF ANY (3) WITNESSES, (4) DOCUMENTATION, OR (5) EVIDENCE WAS EXCLUDED FROM THE HEARING; (6) IF INMATE WAS DENIED CONFRONTATION QUESTIONING AND/OR CROSS EXAMINATION OF A WITNESS AT THE HEARING OR (7) IF HEARING WAS DELAYED.

OFFENSE CODES	847
INMATE PLEA (G, NG, None)	NG
FINDINGS (G, NG, DS) (NGMI) (GMI)	G

IF GUILTY, EVIDENCE PRESENTED CONSIDERED AND REASONS FOR DETERMINATION OF GUILT: (A) ADMISSION OF GUILT; (B) OFFICER'S REPORT; (C) WITNESS TESTIMONY; (D) OTHER. EXPLAIN IN DETAIL:

SANCTIONS:

Loss of Privileges (Days): _____ Reprimand: _____ Loss of Good Time (Days): _____
 Property (Days): _____ Extra Duty (Hours): _____ Restitution: \$ _____
 Canteen (Days): _____ Visit Suspension (Days): _____ Cell Restriction (Days): _____
 Disciplinary Detention (Days): _____ Phone (Days): 30 days Other: _____ (Days): _____

SPECIFIC FACTUAL REASON(S) FOR PARTICULAR PUNISHMENT IMPOSED:

CREDIT FOR PHD TIME SERVED? YES NO IF YES, DAYS: _____
 DATE INMATE PLACED IN PHD: _____ DATE INMATE RELEASED FROM PHD: _____
 INMATE SIGNATURE FOR RECEIPT OF FINAL REPORT: [Signature] DATE: 8/28/23

HEARING OFFICER (PRINT NAME): [Signature]
 APPROVED DD MODIFICATION ONLY: [Signature] WARDEN REASON: _____

CONTACT YOUR CLASSIFICATION CASEWORKER OR COUNSEL SUBSTITUTE IF YOU DO NOT UNDERSTAND THIS FORM.

White - Institutional Record Canary - Inmate (Service of Disciplinary Report) Golden Red - Inmate (Service of Disciplinary Hearing Disposition) Pink - Counsel Record

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS

DISCIPLINARY REPORT AND HEARING RECORD

Case#: 02 Inmate Name: MURDAUGH RICHARD SCDC#: 390394
 Living Area: F5-45 Job: N/A Custody: PC
 Offense Date: 8/15/2023 Offense Time: 08:00 AM PM Institution: [REDACTED] Correctional Institution

Offense Description:

853 The unauthorized use of an inmate's telephone personal identification number(PIN). The unauthorized use of telephone personal identification number is a serious violation. Inmate are prohibited from sharing and using other inmate's telephone PINs.

Charging Officer/Employee: J PALMER Title: WARDEN

INMATE NOTIFICATION: YOU WILL APPEAR BEFORE A HEARING OFFICER 48 HOURS OR MORE AFTER YOUR RECEIPT OF THIS NOTICE. YOU HAVE THE RIGHT TO SUBMIT A WRITTEN STATEMENT AND MAKE A VERBAL STATEMENT.

I GIVE UP MY RIGHT TO 48-HOUR NOTICE AND AUTHORIZE THE HEARING OFFICER TO PROCEED WITH THE HEARING
 I DO NOT WANT TO BE PRESENT AT MY HEARING RRU/GPH SEGREGATION ONLY
 I DO WANT MY ACCUSER PRESENT AT MY HEARING I WANT A COUNSEL SUBSTITUTE
 I DO NOT WANT MY ACCUSER PRESENT AT MY HEARING I DO NOT WANT A COUNSEL SUBSTITUTE

Date & Time Notified: 8/23/23 1:00 AM/PM By (Print): Johnson
 Inmate Signature: [Signature] SCDC#: 390394 Date: 8/21/23

HEARING INFORMATION:

Hearing Date: 8/28/23 Hearing Time: 1:56 @pm Medclass: MH-5
 DD: Assigned Counsel Substitute: [Signature]

EXPLAIN BELOW BY NUMBER: (1) IF COUNSEL SUBSTITUTE WAS NOT PRESENT DURING PART OF THE HEARING; (2) IF ACCUSED WAS EXCLUDED FROM ANY PART OF THE EVIDENCE STAGE; IF ANY (3) WITNESSES, (4) DOCUMENTATION, OR (5) EVIDENCE WAS EXCLUDED FROM THE HEARING; (6) IF INMATE WAS DENIED CONFRONTATION QUESTIONING AND/OR CROSS EXAMINATION OF A WITNESS AT THE HEARING OR (7) IF HEARING WAS DELAYED.

OFFENSE CODES	853	
INMATE PLEA (G, NG, None)	NG	
FINDINGS (G, NG, DS) (NGMI) (GMI)	G	

IF GUILTY, EVIDENCE PRESENTED CONSIDERED AND REASONS FOR DETERMINATION OF GUILT: (A) ADMISSION OF GUILT; (B) OFFICER'S REPORT; (C) WITNESS TESTIMONY; (D) OTHER. EXPLAIN IN DETAIL:

SANCTIONS:

Loss of Privileges (Days): _____ Reprimand: _____ Loss of Good Time (Days): _____
 Property (Days): _____ Extra Duty (Hours): _____ Restitution: \$ _____
 Canteen (Days): 30 days Visit Suspension (Days): _____ Cell Restriction (Days): _____
 Disciplinary Detention (Days): _____ Phone (Days): 30 days Other: _____ (Days): _____

SPECIFIC FACTUAL REASON(S) FOR PARTICULAR PUNISHMENT IMPOSED:

CREDIT FOR PHD TIME SERVED? YES NO IF YES, DAYS: _____
 DATE INMATE PLACED IN PHD: _____ DATE INMATE RELEASED FROM PHD: _____
 INMATE SIGNATURE FOR RECEIPT OF FINAL REPORT: [Signature] DATE: 8/28/23

HEARING OFFICER (PRINT NAME): [Signature] REASON: _____
 APPROVED/MODIFICATION ONLY: [Signature] WARDEN

CONTACT YOUR CLASSIFICATION CASEWORKER OR COUNSEL SUBSTITUTE IF YOU DO NOT UNDERSTAND THIS FORM.

White - Institutional Record Caary - Inmate (Service of Disciplinary Report) Golden Red - Inmate (Service of Disciplinary Hearing Deposition) Pink - Control Record