Record of Death

Provided by South Carolina Department of Corrections, February 1, 2022

Name: GREER, JR., HAROLD

SCDC#: 277417

Sex: M

Race/ethnicity: Black or African American, not of Hispanic origin

Date of birth: 4/8/1959

Date of commitment: 5/18/2006

Date of death: 5/17/2017

Cause of death: Natural Cause

Assigned institution: EVANS

Death location: OUTSIDE MEDICAL

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
Division of Detention and Correctional Inspections

DEATH OF ANY INMATE IN JAIL OR PRISON

(Section 24-9-35 and 17-7-10, South Carolina Code of Laws)
(Standards 1047 and 1049, Minimum Standards for Local Detention Facilities in South Carolina)

1. Facility: Evans Correctional Institution
   Address: 610 Hwy 9 west
2. Name of deceased: Harold Greer SCDC #: 297417
3. Home Address: [redacted]
4. Description: DOB [redacted] Height 5'10" Weight 170 Hair Black
   Eyes Brown Sex Male Race Black SOC SEC # _____
5. Arresting Offense(s): _____
6. Date and time of commitment: _____ Tried _____ Untried _____
7. Name and address of relative(s) of the deceased contacted: [redacted]
8. Record of deceased inmate's physical condition upon admission: _____
9. Cause of death: Heart Attack
10. Time and date of death: 7:50 (a.m.) _____ p.m. May 17 th 2017
11. Name of doctor who pronounced death: Dr. R. Hacton
12. Name of coroner who ordered autopsy: _____
13. Autopsy performed by: _____
14. Name of person discovering deceased, time discovered, and location within facility: _____
15. At the time of death: _____ (Actual Count) _____ (# of Officers on Duty)
16. When inmate was last seen alive: _____

NOTIFY BY TELEPHONE: 896-8506

MAIL OR DELIVER REPORT TO:

SOUTH CAROLINA DEPARTMENT OF CORRECTIONS
DIVISION OF DETENTION AND CORRECTIONAL INSPECTIONS
Post Office Box 21787
Columbia, South Carolina 29221

SIGNATURE OF OFFICIAL MAKING REPORT

Archie Sanderson
TYPED OR PRINTED TITLE OF OFFICIAL

5.17.17
DATE OF REPORT

SCDC 8-2 (Revised May, 1997)