

**PLAINTIFF'S INFORMATION SHEET**

**The Plaintiff is the person requesting the court hearing.**

**NAME:** \_\_\_\_\_

**COMPLETE ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

**PHONE NUMBER WITH AREA CODE:** \_\_\_\_\_

\_\_\_\_\_ County

**\*ATTENTION\***

**If this form is not filled out completely or accurately the Sheriff's Office may not be successful with services on the defendant.**

**Defendant Name (Person to be served):**

\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race: \_\_\_\_\_

Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Make and color of vehicle: \_\_\_\_\_ Tag Number: \_\_\_\_\_

Working Hours: \_\_\_\_\_ Home Before: \_\_\_\_\_ After: \_\_\_\_\_

**Plaintiff (Victim):** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race: \_\_\_\_\_

Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Phone Number: \_\_\_\_\_

STATE OF SOUTH CAROLINA )  
 )  
 COUNTY OF \_\_\_\_\_ )  
 )  
 \_\_\_\_\_ )  
 Plaintiff, )  
 vs. )  
 )  
 \_\_\_\_\_ )  
 Defendant. )

IN THE FAMILY COURT  
 \_\_\_\_\_ JUDICIAL CIRCUIT

**FAMILY COURT COVERSHEET**

Docket No. \_\_\_\_\_

**NOTE: The coversheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for docketing purposes for the Clerk of Court and must be signed and dated, and filled out completely. A copy of this coversheet must be served on the defendant(s) along with the Summons and Complaint.**

**Submitted by:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
 \_\_\_\_\_  
**Email:** \_\_\_\_\_

**SC Bar #** \_\_\_\_\_  
**Telephone #** \_\_\_\_\_  
**Fax #** \_\_\_\_\_  
**Other:** \_\_\_\_\_

**DOCKETING INFORMATION**

- This case is subject to MEDIATION pursuant to the Family Court Alternative Dispute Resolution Rules.
- This case is exempt from ADR (certificate attached).

**Nature of Action Codes  
 (Check One)**

**Marital Dissolution**

- Divorce (110)
- Annulment (120)
- Separate Support and Maintenance (130)
- Registration of Foreign Divorce Decree – without support/custody (190)
- Registration of Foreign Divorce Decree – with support/custody (191)
- Marital Dissolution – Other (199) \_\_\_\_\_

**Abuse and Neglect**

- Abuse and Neglect – Child (210)
- Abuse and Neglect – Adult (220)
- Abuse and Neglect – Other (299) \_\_\_\_\_

**Juvenile Delinquency**

- Truancy (311)
- Incurable (312)
- Runaway (313)
- Criminal Offense – Drug (315)
- Criminal Offense – Against a Person (316)
- Criminal Offense – Property (317)
- Criminal Offense – Public Order (318)
- Criminal Offense – Other (320)
- Juvenile Delinquency – Other (399) \_\_\_\_\_

**Protection from Domestic Abuse**

- Domestic Abuse – Intimate Partner (410)
- Domestic Abuse – Minor (420)
- Registration of Foreign Order of Protection (490)
- Domestic Abuse – Other (499) \_\_\_\_\_

**Support**

- Child Support – Private (501)
- Child Support – Administrative Process (502)
- Child Support – Judicial Process (503)
- Registration of Foreign Order of Support (504)
- UIFSA – Outgoing (505)
- UIFSA – Incoming (506)
- Modification of Child Support – Private (507)
- Modification of Child Support – DSS (508)
- Modification of Alimony (525)
- College Expenses (530)
- Support – Other (599) \_\_\_\_\_

**Custody/Visitation**

- Child Custody/Visitation (610)
- Modification of Custody/Visitation (615)
- Temporary Custody – Nonparent (616)
- Registration of Foreign Child Custody Order (690)
- Visitation Involvement Parenting (VIP) (DSS only) (691)
- Custody/Visitation – Other (699) \_\_\_\_\_

**Miscellaneous Actions**

- Name Change (710)
- Correction/Birth Record (720)
- Judicial Bypass (730)
- Adoption (740)
- Foreign Adoption (741)
- Post Dissolution Equitable Distribution (750)
- Paternity – Private (761)
- Paternity – DSS (762)
- Termination of Parental Rights – Private (771)
- Termination of Parental Rights – DSS (772)
- Miscellaneous Actions – Others (799) \_\_\_\_\_

**Submitting Party Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Custodial Parent (if applicable): \_\_\_\_\_

**Note:** Frivolous civil proceedings are subject to sanctions pursuant to Rule 11, SCRPC, and the South Carolina Frivolous Civil Proceedings Sanctions Act, S.C. Code Ann. §§ 15-36-10 et seq.

**Effective January 1, 2016**, family court actions in all counties are subject to mediation. Under the provisions of the Supreme Court's Rules for Alternative Dispute Resolution (ADR), mediation is defined as an informal process in which a third-party mediator facilitates settlement discussions between parties. Any settlement is voluntary. In the absence of settlement, the parties lose none of their rights to trial.

Also under the ADR Rules, the parties may agree on a mediator or the Clerk of Court will appoint a mediator from the certified list. If the Clerk appoints a mediator from the list, the mediator will be certified by the Board of Arbitrator and Mediator Certification and may be either a lawyer, a licensed mental health professional or any other individual meeting the certification requirements.

Whether or not the mediator is a lawyer, if appointed by the court, the charge per hour is set at a specified amount under the provisions of ADR Rule 9. Parties are responsible for payment of the mediator as set out in ADR Rule 9.

**SUPREME COURT RULES REQUIRE MEDIATION OF ALL CONTESTED DOMESTIC RELATIONS ACTIONS.** IF THE DOCKETING INFORMATION ON PAGE 1 OF THIS COVERSHEET INDICATES THAT THIS CASE IS SUBJECT TO **MEDIATION** YOU ARE NOTIFIED THAT MEDIATED SETTLEMENT CONFERENCES ARE REQUIRED IN THIS CASE, AND THAT THE COURT-ANNEXED ADR RULES SHALL APPLY TO ALL CASES IN WHICH MEDIATION IS REQUIRED. FOR ADDITIONAL INFORMATION CONCERNING THE PROCESS AND TIME FRAMES, PLEASE CONSULT THE ADR RULES. KEY SECTIONS OF THE RULES ARE IDENTIFIED BELOW.

#### **CONTESTED ACTIONS INVOLVING CUSTODY AND VISITATION**

Rule 3	Actions Subject to ADR
Rule 4(d)(1)(3)(4) &(5)	Appointment of Mediator by Family Court
Rule 5(g)	Scheduling in Family Court
Rule 6(g)	Agreement in Family Court
Rule 7(f)	Reporting Results of Conference
Rule 9	Compensation of Neutral

#### **ALL OTHER CONTESTED ACTIONS**

Rule 3	Actions Subject to ADR
Rule 4(d)(2)(3)(4) &(5)	Appointment of Mediator by Family Court
Rule 5(g)	Scheduling in Family Court
Rule 6(g)	Agreement in Family Court
Rule 7(f)	Reporting Results of Conference
Rule 9	Compensation of Neutral

**Indigent Cases:** Where a mediator has been appointed, a party may move before the Chief Judge for Administrative Purposes to be exempted from payment of neutral fees and expenses based upon indigency. Determination of indigency shall be in the sole discretion of the Chief Judge for Administrative Purposes. Application of a party to be exempt from payment of neutral fees due to indigency should be filed prior to the scheduling of the ADR conference.

**Please Note: Attendance at mediated settlement conferences is mandatory. You must comply with the Supreme Court rules regarding court-ordered mediation. Failure to do so may affect your case and may result in sanctions.**

**Note:** Frivolous civil proceedings are subject to sanctions pursuant to Rule 11, SCRPC, and the South Carolina Frivolous Civil Proceedings Sanctions Act, S.C. Code Ann. §§ 15-36-10 et seq.

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF \_\_\_\_\_ )  
 )  
\_\_\_\_\_)  
Petitioner, )  
 )  
vs. )  
 )  
\_\_\_\_\_)  
Respondent. )

IN THE FAMILY COURT  
\_\_\_\_ JUDICIAL CIRCUIT

**SUMMONS**  
(Protection From Domestic Abuse Act)

Docket No. \_\_\_\_\_

TO: \_\_\_\_\_, Respondent

The above named Petitioner having filed a Petition for Order of Protection,

**YOU ARE HEREBY SUMMONED TO APPEAR** before the Family Court at:

\_\_\_\_\_ in \_\_\_\_\_, South Carolina  
(Street Address) (City or Town)

on ( / / ), at \_\_\_\_:\_\_\_\_ (  a.m./ p.m.), to show cause why the Order of Protection prayed for by the Petitioner should not be made.

On your failure to appear as directed, the relief prayed for in the Petition may be granted.

Date: \_\_\_\_\_, 20\_\_\_\_  
\_\_\_\_\_ S.C.

\_\_\_\_\_  
Clerk of Court

STATE OF SOUTH CAROLINA )  
 )  
COUNTY OF \_\_\_\_\_ )  
 )  
\_\_\_\_\_  
Petitioner )  
 )  
vs. )  
 )  
\_\_\_\_\_  
Respondent. )

IN THE FAMILY COURT  
\_\_\_\_\_  
JUDICIAL CIRCUIT

**PETITION FOR ORDER OF PROTECTION**  
(For Use in Family Court)

Docket No. \_\_\_\_\_

Respondent's SSN: \_\_\_\_\_  
Respondent's Date of Birth: \_\_\_\_\_  
Respondent's Race: \_\_\_\_\_  
Respondent's Sex: \_\_\_\_\_

I ask this court to issue an Order of Protection, because:

- This is the county where this case should be handled, since (check one):  
 a. The alleged act of abuse occurred in this county.  
 b. The person who caused the abuse lives in this county.  
 c. The person who caused the abuse and I last lived together in this county.
- The person who caused the abuse lives at \_\_\_\_\_ (street address) in or near the town or city of \_\_\_\_\_, which is in \_\_\_\_\_ County, and the State of \_\_\_\_\_.
- The person who was abused was (check one or both, and supply information):  
 a. \_\_\_\_\_, who is the person asking for an Order of Protection;  
 b. \_\_\_\_\_, who is a child/victim under 18 years old who lives with me.
- That the Respondent and the Petitioner (check one or more):  
 are spouses  were formerly spouses  
 have a child/children in common, who is/are: \_\_\_\_\_  
 are cohabiting  formerly have cohabited
- The abuse happened at \_\_\_\_\_ (address/location) on \_\_\_\_\_ (date), at \_\_\_\_\_ (time) (  a.m./ p.m.) when \_\_\_\_\_ (Name of person causing abuse) did this: \_\_\_\_\_.
- Is Petitioner/Victim aware of prior convictions of domestic violence or prior orders of protection against this Respondent? Yes  No . If yes, please state date: \_\_\_\_\_.
- I ask this court to grant the following temporary relief (check as many as apply and supply information)  
 a. issue an order of protection which prohibits and forbids \_\_\_\_\_ from abusing, threatening to abuse, or molesting, or engaging in any other conduct that would place Petitioner/Victim in reasonable fear of bodily injury.  
 b. issue an order of protection which restrains and prohibits \_\_\_\_\_ from using, attempting to use, or threatening to use physical force against Petitioner/Victim that would reasonably be expected to cause bodily injury.  
 c. issue an Order of Protection which restrains, prohibits, and forbids \_\_\_\_\_ from communicating or attempting to communicate with Petitioner/Victim in any way, and from

entering or attempting to enter the home of the victim, place of employment, education, or other location as the court may order.

- d. issue an order granting \_\_\_\_\_ temporary custody of the following minor child(ren).

Name	Date of Birth	Address

- grant reasonable visitation or  deny visitation.

- e. issue an order granting Petitioner temporary child support. (Financial Declaration [Form SCCA 430 or 430S Short Form Financial Declaration] MUST be completed and attached).
- f. issue an order granting Petitioner temporary financial support. (Financial Declaration [Form SCCA 430 or 430S Short Form Financial Declaration] MUST be completed and attached).
- g. issue an order granting Petitioner temporary exclusive use and possession of the home and furnishings.
- h. issue an order which forbids \_\_\_\_\_ from transferring, selling, destroying, encumbering, or otherwise disposing of real or personal property belonging to Petitioner or jointly owned.
- i. issue an order which indicates Respondent is prohibited and forbidden to abuse, harm, or molest, or threaten to abuse, harm or molest any pet animal owned, possessed, kept, or held by Petitioner/Victim.
- j. issue an order which gives Petitioner assistance from law enforcement in that Petitioner will be accompanied:
  - (1) in removing personal property from \_\_\_\_\_ (Street Address) in \_\_\_\_\_ (City) \_\_\_\_\_ (County), South Carolina.
  - (2) in placing Petitioner in possession of the home and furnishings at \_\_\_\_\_ (Street Address) in \_\_\_\_\_ (City) \_\_\_\_\_ (County), South Carolina.
- k. issue an order reimbursing Petitioner for costs and attorney's fees.
- l. hold a hearing within 15 days of the date of filing these papers.
- m. hold an emergency hearing within 24 hours.
- n. issue an order granting Petitioner/Victim the following additional requests:  
\_\_\_\_\_.

Sworn to and Subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public for South Carolina

\_\_\_\_\_  
Signature of Petitioner

My Commission expires \_\_\_\_\_

STATE OF SOUTH CAROLINA, )  
COUNTY OF \_\_\_\_\_ )

IN THE FAMILY COURT

\_\_\_\_\_ JUDICIAL CIRCUIT

Petitioner )

vs. )

MOTION AND AFFIDAVIT FOR  
EMERGENCY HEARING

(Protection From Domestic Abuse Act)

Respondent. )

FILE NO. \_\_\_\_\_

I, \_\_\_\_\_ being duly sworn, state that I am (the Petitioner)  
(making this Petition on behalf of the Petitioner) and that the Petitioner is in immediate and  
present danger of bodily injury as shown by the following facts:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Therefore, I am requesting an emergency hearing.

Sworn to and Subscribed before me  
this \_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Notary Public for South Carolina

\_\_\_\_\_  
Signature of Petitioner or Person Making  
Petition on Behalf of Petitioner

My Commission expires \_\_\_\_\_

**ORDER**

Request for emergency hearing granted/denied (circle one).

\_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_, S. C.

\_\_\_\_\_  
(Judge of Family Court) (Magistrate)  
\_\_\_\_\_, County, S.C.



STATE OF SOUTH CAROLINA )  
 COUNTY OF \_\_\_\_\_ )  
 )  
 \_\_\_\_\_ )  
 Plaintiff )  
 vs )  
 )  
 \_\_\_\_\_ )  
 Defendant )

IN THE FAMILY COURT OF THE  
 \_\_\_\_\_ JUDICIAL CIRCUIT

**SHORT FORM  
 FINANCIAL DECLARATION  
 OF \_\_\_\_\_  
 (FOR USE ONLY IN CHILD SUPPORT ENFORCEMENT  
 AND WITH PETITION FOR ORDER OF PROTECTION)**

Docket No. \_\_\_\_\_

Address	
Age	
Occupation	
Employer	
Employer Address	

**Gross Monthly Income** Amount:

1) Earnings (**attach recent pay stubs**) \_\_\_\_\_  
 2) Overtime \_\_\_\_\_  
 3) Social Security, VA Benefits  
 Workers Comp or Disability (SSI) \_\_\_\_\_  
 4) Unemployment \_\_\_\_\_  
 5) Alimony/Child Support \_\_\_\_\_  
 6) Other (Specify) \_\_\_\_\_  
 (Add lines 1-6) Total Amount: \_\_\_\_\_

**Monthly Expenses** Amount:  
**(have proof of expenses available)**

1) Rent/Mortgage \_\_\_\_\_  
 2) Utilities \_\_\_\_\_  
 3) Cell phone/Phone \_\_\_\_\_  
 4) Food \_\_\_\_\_  
 5) Child Support/Alimony  
 (outside of this case) \_\_\_\_\_  
 6) Child Care \_\_\_\_\_  
 7) Car Payment \_\_\_\_\_  
 8) Car Operating Expenses  
 (Insurance, gas, maintenance) \_\_\_\_\_  
 9) Clothing \_\_\_\_\_  
 10) Cable/Satellite TV/Internet \_\_\_\_\_  
 11) Medical/Dental/Vision Expenses (self) \_\_\_\_\_  
 12) Medical/Dental/Vision Expenses (child) \_\_\_\_\_  
 13) Medical/Dental/Vision Insurance (self) \_\_\_\_\_  
 14) Medical/Dental/Vision Insurance (child) \_\_\_\_\_  
 15) Credit Card/Loan Payments \_\_\_\_\_  
 16) Other (Specify) \_\_\_\_\_  
 (Add lines 1-16) Total Amount: \_\_\_\_\_

**Assets** Amount:

1) Cash \_\_\_\_\_  
 2) Money in Bank accounts  
 (Checking & Savings) \_\_\_\_\_  
 3) IRA/401K/Pensions \_\_\_\_\_  
 4) Other (Specify) \_\_\_\_\_  
 (Add lines 1-4) Total Amount: \_\_\_\_\_

How many other biological children in the home? \_\_\_\_\_  
 Name(s) and Date(s) of Birth

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day  
 of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
 Notary Public for South Carolina  
 My Commission Expires: \_\_\_\_\_