

**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 \_\_\_\_\_ )

IN THE MAGISTRATES COURT

\_\_\_\_\_)  
\_\_\_\_\_)  
\_\_\_\_\_)  
PLAINTIFF(S) )  
VS. )  
\_\_\_\_\_)  
\_\_\_\_\_)  
DEFENDANT(S) )

COMPLAINT AND MOTION  
FOR RESTRAINING ORDER  
(Harassment and Stalking)

\_\_\_\_\_  
CIVIL CASE NUMBER

The Plaintiff alleges:

1. The Plaintiff lives in \_\_\_\_\_ County.
2. The Defendant lives at \_\_\_\_\_, which is in \_\_\_\_\_.
3. The Harassment First or Second Degree or Stalking occurred in \_\_\_\_\_.
4. Plaintiff further alleges that the following conduct occurred by the defendant on the times, dates, and places listed below, and such conduct falls within the definition of:  
 HARASSMENT, FIRST DEGREE (§16-3-1700 (A)), or  
 HARASSMENT, SECOND DEGREE (§ 16-3-1700 (B)), or  
 STALKING (§ 16-3-1700 (C)).
5. \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_ O'clock, A.M./P.M. (circle one), at \_\_\_\_\_, which is in \_\_\_\_\_, \_\_\_\_\_, the conduct complained of occurred when the defendant:

\_\_\_\_\_  
\_\_\_\_\_  
On \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_ O'clock, A.M./P.M. (circle one), at \_\_\_\_\_, which is in \_\_\_\_\_, \_\_\_\_\_, the conduct complained of occurred when the defendant:

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On \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_ O'clock, A.M./P.M. (circle one), at \_\_\_\_\_, which is in \_\_\_\_\_, \_\_\_\_\_, the conduct complained of occurred when the defendant:

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(State details of harassment/stalking and other facts and circumstances upon which relief is sought above. Attach additional sheets if necessary.)

6. Plaintiff requests: (Check one or more)

- a. That the defendant be enjoined from abusing, threatening to abuse, or molesting the plaintiff or members of the plaintiff's family.
- b. That the defendant be enjoined from entering or attempting to enter the plaintiff's place of residence, employment, education, or other location.
- c. That the defendant be enjoined from communicating or attempting to communicate with the plaintiff in a way that would violate Article 17, Chapter 16 of the 1976 South Carolina Code of Laws, as amended.

SWORN to and Subscribed before me )  
 )  
This \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_. )  
 )  
 )  
 )  
\_\_\_\_\_  
Notary Public for South Carolina )  
My Commission expires: \_\_\_\_\_ )

\_\_\_\_\_  
Signature of Plaintiff or Person Filing  
on Behalf of Plaintiff

**NOTICE: THE NON-PREVAILING PARTY IN THIS ACTION IS ASSESSED A FILING FEE OF FIFTY-FIVE DOLLARS (\$55.00). THE COURT MAY HOLD A PERSON IN CONTEMPT OF COURT FOR FAILURE TO PAY THIS FILING FEE. §16-03-170(D).**

**NOTICE TO DEFENDANT: YOU HAVE THE RIGHT TO EMPLOY COUNSEL TO REPRESENT YOU.**



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

IN THE MAGISTRATES COURT

\_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
VS. PLAINTIFF(S) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
\_\_\_\_\_) )  
DEFENDANT(S) )

MOTION AND AFFIDAVIT FOR  
EMERGENCY HEARING  
(Temporary Restraining Order)  
(Harassment and Stalking)

\_\_\_\_\_  
CIVIL CASE NUMBER

I, \_\_\_\_\_, being duly sworn, state that I am the Plaintiff/making this motion on behalf of the Plaintiff (circle one) and that the Plaintiff is in present danger of bodily injury as shown by the following facts:

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

Therefore, I request an emergency hearing.

SWORN to and Subscribed before me )  
 )  
this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_ )  
 )  
\_\_\_\_\_) )  
Notary Public for South Carolina or Judge )  
 )  
My Commission expires: \_\_\_\_\_ )

\_\_\_\_\_  
Signature of Plaintiff or Person Filing  
on Behalf of Plaintiff

ORDER

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

\_\_\_\_\_

\_\_\_\_\_  
(MAGISTRATE)