



**SOUTH CAROLINA
JUDICIAL BRANCH**

STATE OF SOUTH CAROLINA)
COUNTY OF _____)
)
)
_____,)
Petitioner)
)
v.)
)
_____,)
Respondent)
)

IN THE _____ COURT
_____ JUDICIAL CIRCUIT

**MOTION AND AFFIDAVIT
FOR EMERGENCY HEARING**
(Protection from Domestic Abuse Act)

Docket No. _____

I, _____, being duly sworn, state that I am the Petitioner / asking the Court for this on behalf of the Petitioner and that I am / the Petitioner is in immediate and present danger of bodily injury as shown by the following facts: _____

Therefore, I am requesting an emergency hearing.

I swear or affirm that I know the facts above to be true. I believe anything above that is stated on information and belief to be true.

Signature

Sworn to and subscribed before me this ____ day of _____, 20____.

Signature of Notary Public

Printed Name of Notary Public

My Commission Expires the ____ day of _____, 20 ____.

ORDER

Request for emergency hearing is granted / denied this ____ day of _____, 20____
in _____, South Carolina.

Judge Signature

- Family Court Judge
- Magistrate

_____ County, South Carolina