

GUIDELINES FOR VISITATION PAPERWORK

1. Summons

Fill in the Heading (Plaintiff/Defendant)

- You are the Plaintiff. Your name goes in this blank.
- The person you filing against is the Defendant. Their name goes in this blank.

2. Complaint (visitation)

Fill in the Headings (Plaintiff/Defendant)

- Make sure you answer all questions.
- Sign the bottom, date, city, and telephone #.

3. Data Form

- Fill in everything about yourself
- Fill out as much as possible about the Defendant (**WE MUST HAVE AN ADDRESS FOR SERVICE**)

STATE OF SOUTH CAROLINA
COUNTY OF SUMTER

IN THE FAMILY COURT

SUMMONS

PLAINTIFF

FILE NO. _____

VS.

DEFENDANTS

TO: THE DEFENDANT(S) ABOVE-NAMED:

YOU ARE HEREBY SUMMONED and required to answer the complaint herein, a copy of which is herewith served upon you, and to serve a copy of your answer to this complaint upon the subscriber, at the address shown below, within thirty (30) days after service hereof, exclusive of the day of such service, and if you fail to answer the complaint, judgment by default will be rendered against you for the relief demanded in the complaint.

Sumter, South Carolina

Plaintiff

Dated: _____

Address: _____

Telephone: _____

STATE OF SOUTH CAROLINA
COUNTY OF SUMTER

IN THE FAMILY COURT
THIRD JUDICIAL CIRCUIT

PLAINTIFF

COMPLAINT
(For Visitation)

VS.

Docket _____

DEFENDANT

The Plaintiff complaining of the Defendant would show the Court as follows:

1. That the Plaintiff resides at _____
in _____ County and State of _____.

2. That the Defendant resides at _____
in _____ County and State of _____.

3. That the Plaintiff is father/mother of the following named child or children:

Name	Date of Birth
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_____	_____
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_____	_____
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4. That said children are in the care and custody of the said Defendant.

5. That the Plaintiff is desirous of exercising visitation with said children and Defendant has refused permission for me to do so.

6. That the Plaintiff requests visitation as follows:

WHEREFORE, the Plaintiff prays to the Court that visitation be provided in this matter.

_____, S.C.

Plaintiff

_____, _____

Telephone _____

DOCKET NUMBER # _____ SOCIAL SECURITY #: _____

PLAINTIFF:

NAME: _____

ADDRESS: _____

EMPLOYER: _____

EMPLOYMENT ADDRESS: _____

HOME PHONE: _____ BUSINESS PHONE: _____

DEFENDANT: SOCIAL SECURITY #: _____

NAME: _____

ADDRESS: _____

EMPLOYER: _____

EMPLOYMENT ADDRESS: _____

WORK HOURS: _____

HOME PHONE: _____ BUSINESS PHONE: _____

RACE: _____ SEX: _____ AGE: _____

D.O.B.: _____

NOTE!!!!!!!!!! If the address of the defendant is a RURAL BOX NUMBER give the name of the road/street and draw a small map showing how to get there.