

STATE OF SOUTH CAROLINA)
COUNTY OF CHARLESTON)

PLAINTIFF)

STREET ADDRESS)

CITY, STATE ZIP)

TELEPHONE)
VS.)

DEFENDANT(S))

STREET ADDRESS)

CITY, STATE ZIP)

TELEPHONE)

CIVIL CASE NUMBER _____
IN THE MAGISTRATE'S COURT

ANSWER

On _____ I was served with a Complaint requiring me to answer within thirty days from the date of service.
My Answer, which is hereby filed with the _____ Magistrate Court, is as follows:

CHECK ONE:

- A. ☐ I contest the jurisdiction of the court based on the following: (use additional pages if necessary) _____
- B. ☐ I admit everything in the complaint and do not want a trial.
- C. ☐ I admit that I am responsible, but not for the total amount claimed by the Plaintiff(s) because:
(use additional pages if necessary) _____
- D. ☐ I deny that I am responsible at all because: (use additional pages if necessary) _____

You must file this document with the Court within thirty days.

THE DEFENDANT STATES THAT THE INFORMATION CONTAINED IN THIS ANSWER IS TRUE
AND CORRECT TO THE BEST OF HIS KNOWLEDGE.

Dated: _____

Signature of Defendant (or his attorney)