

STATE OF SOUTH CAROLINA)
COUNTY OF Charleston)

IN THE COURT OF COMMON PLEAS
9 JUDICIAL CIRCUIT

CASE NO.: 2023CP-100-1484

Peggy Kandies
Plaintiff,)

MOTION AND ORDER INFORMATION
FORM AND COVERSHEET

vs.)

City of North Charleston
et al
Defendant.)

Appeal of Order
written by Defendants
Attorneys

Plaintiff's Attorney: _____, Bar No. <u>Pro se</u> Address: _____ Phone: ____ <u>843-364-1003</u> E-mail: _____ Other: <u>Peggy.Kandies@9mail.com</u>	Defendant's Attorney: _____, Bar No. _____ Address: _____ Phone: _____ Fax _____ E-mail: _____ Other: _____
<input checked="" type="checkbox"/> MOTION HEARING REQUESTED (attach written motion and complete SECTIONS I and III) <input type="checkbox"/> FORM MOTION, NO HEARING REQUESTED (complete SECTIONS II and III) <input type="checkbox"/> PROPOSED ORDER/CONSENT ORDER (complete SECTIONS II and III)	
SECTION I: Hearing Information	
Nature of Motion: <u>Appeal</u> Estimated Time Needed: _____ Court Reporter Needed: <input checked="" type="checkbox"/> YES / <input type="checkbox"/> NO	
SECTION II: Motion/Order Type	
<input checked="" type="checkbox"/> Written motion attached <u>Appeal</u> <input type="checkbox"/> Form Motion/Order I hereby move for relief or action by the court as set forth in the attached proposed order. <u>Peggy Kandies</u> Signature of Attorney for <input type="checkbox"/> Plaintiff / <input type="checkbox"/> Defendant _____ Date submitted _____	
SECTION III: Motion Fee	
<input type="checkbox"/> PAID - AMOUNT: \$ _____ <input type="checkbox"/> EXEMPT: (check reason) <input type="checkbox"/> Rule to Show Cause in Child or Spousal Support <input type="checkbox"/> Domestic Abuse or Abuse and Neglect <input type="checkbox"/> Indigent Status <input type="checkbox"/> State Agency v. Indigent Party <input type="checkbox"/> Sexually Violent Predator Act <input type="checkbox"/> Post-Conviction Relief <input type="checkbox"/> Motion for Stay in Bankruptcy <input type="checkbox"/> Motion for Publication <input type="checkbox"/> Motion for Execution (Rule 69, SCRCP) <input type="checkbox"/> Proposed order submitted at request of the court; or, reduced to writing from motion made in open court per judge's instructions Name of Court Reporter: _____ <input type="checkbox"/> Other: _____	
JUDGE'S SECTION	JUDGE CODE _____
<input type="checkbox"/> Motion Fee to be paid upon filing of the attached order. <input type="checkbox"/> Other: _____	Date: _____
CLERK'S VERIFICATION	
Collected by: _____ Date Filed: _____ <input type="checkbox"/> MOTION FEE COLLECTED: \$ _____ <input type="checkbox"/> CONTESTED - AMOUNT DUE: \$ _____	RECEIVED MAR 20 2024 SC Court of Appeals