

**IN THE COURT OF COMMON PLEAS  
CLARION COUNTY, PENNSYLVANIA**

_____ ,	:	
<b>Plaintiff,</b>	:	
<b>vs.</b>	:	<b>No. CD</b>
_____ ,	:	
<b>Defendant,</b>	:	

**PETITION TO PROCEED IN FORMA PAUPERIS**

**AND NOW**, comes \_\_\_\_\_, the Plaintiff/Defendant herein, and moves this court to permit him/her to proceed in this matter without payment of costs of litigation and in support of his/her petition states as follows:

1. I am the Plaintiff/Defendant in the above matter and because of my financial condition am unable to pay the fees and costs of prosecuting or defending the action or proceeding.
2. I am unable to obtain funds from anyone, including my family and associates, to pay the costs of litigation.
3. I represent that the information below relating to my ability to pay the fees and costs is true and correct:

(a) Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

(b) Employment:

If you are presently employed, state

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Salary or wages per month: \_\_\_\_\_

Type of work: \_\_\_\_\_

If you are presently unemployed, state:

Date of last employment: \_\_\_\_\_

Salary or wages per month: \_\_\_\_\_

Type of work: \_\_\_\_\_

(c) Other income within the past twelve months: \_\_\_\_\_

Business or profession: \_\_\_\_\_

Other self-employment: \_\_\_\_\_

Interest: \_\_\_\_\_

Dividends: \_\_\_\_\_

Pension and annuities: \_\_\_\_\_

Social security benefits: \_\_\_\_\_

Support payments: \_\_\_\_\_

Disability payments: \_\_\_\_\_

Unemployment compensation and supplemental benefits: \_\_\_\_\_

\_\_\_\_\_

Workman's compensation: \_\_\_\_\_

Public assistance: \_\_\_\_\_

Other: \_\_\_\_\_

\_\_\_\_\_

(d) Other contributions to household support

(Wife)(Husband) Name: \_\_\_\_\_

If your (wife)(husband) is employed, state:

Employer: \_\_\_\_\_

Salary or wages per month: \_\_\_\_\_

Type of work: \_\_\_\_\_

Contributions from children: \_\_\_\_\_

Contributions from parents: \_\_\_\_\_

Other contributions: \_\_\_\_\_

(e) Property owned:

Cash: \_\_\_\_\_

Checking account: \_\_\_\_\_

Savings account \_\_\_\_\_

Certificates of deposit: \_\_\_\_\_

Real estate (including home): \_\_\_\_\_

Motor vehicle: Make \_\_\_\_\_, Year \_\_\_\_\_,  
Cost \_\_\_\_\_, Amount Owed \$ \_\_\_\_\_

Stocks; bonds: \_\_\_\_\_

Other: \_\_\_\_\_

(f) Debts and obligations:

Mortgage: \_\_\_\_\_

Rent: \_\_\_\_\_

Loans: \_\_\_\_\_

Other: \_\_\_\_\_

(g) Persons dependent upon you for support:

(Wife)(Husband) Name: \_\_\_\_\_

Children, if any:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other persons:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

4. I understand that I have a continuing obligation to inform the court of improvement in my financial circumstances which would permit me to pay the costs incurred herein.

5. I verify that the statements made in this affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. s 4904, relating to un-sworn falsification to authorities.

WHEREFORE, your Petitioner requests that he be allowed to proceed without payment of costs.

Date: \_\_\_\_\_  
\_\_\_\_\_ Petitioner