

IN FORMA PAUPERIS
AFFIDAVIT/PETITION

COMMONWEALTH OF
PENNSYLVANIA

DOCKET # _____

STATEMENT OF THE PETITIONER

I hereby request that this Court permit me to proceed in forma pauperis (without payment of the filing fee). In support of this I state the following:

- 1. I am the defendant in the above matter and because of my financial condition am unable to pay the fee for filing this action.
- 2. I am unable to obtain funds from anyone, including my family and associates, to pay the costs of prosecution.
- 3. I represent that the information below relating to my ability to pay the fees and costs is true and correct:

NAME AND ADDRESS	PRESENT EMPLOYER'S NAME AND ADDRESS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

SOCIAL SECURITY NUMBER: _____ SALARY OR WAGES PER MONTH: _____

TYPE OF WORK: _____
 I AM PRESENTLY UNEMPLOYED.
THE DATE OF MY LAST EMPLOYMENT WAS: _____

SALARY OR WAGES PER MONTH: _____
TYPE OF WORK: _____

OTHER INCOME RECEIVED WITHIN THE PAST TWELVE MONTHS:

BUSINESS OR PROFESSION:	INTEREST:
OTHER SELF-EMPLOYMENT:	DIVIDENDS:
PENSION AND ANNUITIES:	SUPPORT PAYMENTS:
SOCIAL SECURITY BENEFITS:	DISABILITY PAYMENTS:
WORKMAN'S COMPENSATION:	PUBLIC ASSISTANCE:
UNEMPLOYMENT COMPENSATION AND SUPPLEMENTAL BENEFITS:	
OTHER:	

Case Number:

Docket Number:

OTHER CONTRIBUTIONS TO HOUSEHOLD SUPPORT:

(WIFE) (HUSBAND) NAME:

MY (WIFE) (HUSBAND) IS EMPLOYED:

SPOUSE'S EMPLOYER:

SALARY OR WAGES PER MONTH:

TYPE OF WORK:

CONTRIBUTIONS FROM CHILDREN:

CONTRIBUTIONS FROM PARENTS:

OTHER CONTRIBUTIONS:

PROPERTY OWNED

CASH:

CHECKING ACCOUNT:

SAVINGS ACCOUNT:

CERTIFICATES OF DEPOSIT:

REAL ESTATE (INCLUDING HOME):

MOTOR VEHICLE: MAKE

YEAR

COST

AMOUNT OWED: \$

STOCKS: BONDS:

OTHER

DEBTS AND OBLIGATIONS

MORTGAGE:

RENT:

LOANS:

OTHER:

PERSONS DEPENDENT UPON ME FOR SUPPORT

(WIFE) (HUSBAND) NAME:

CHILDREN, IF ANY:

NAME:

AGE:

NAME:

AGE:

NAME:

AGE:

NAME:

AGE:

NAME:

AGE:

OTHER PERSONS - NAME:

RELATIONSHIP:

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 petition are true and correct. I understand that false statements herein are made subject to penalties of 18 Pa. C.S. Sec. 4904, relating to unsworn falsification to authorities.

Date:

Signature of the Petitioner:

AND now, this ____ day of _____, upon consideration of the above petition, defendant's petition to proceed In Forma Pauperis is _____.

All fees, costs and fines are waived.