IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA CIVIL DIVISION

:

Plaintiff : vs. : File No. Defendant :

PETITION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

TO THE HONORABLE, THE JUDGES OF SAID COURT:

The Petition of _______ respectfully represents:

- 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.
- I represent that the information below relating to my ability to pay the fees and costs is true and correct:
 - (a.) Name:

Address:

Phone Number:

(b.) Employment:

If you are presently employed, state:

Employer:

Address:

Salary or wages per month:

Types 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 of profession:

Other self-employment: _______

Dividends: ______
Pension and annuities: ______
Social Security benefits: ______

Support payments:

Disability payments:

Unemployment compensation and supplemental benefits:

	Workers' compensation:
	Public assistance:
	Other:
(d.)	Other contributions to household support:
	Wife's/Husband's 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 and bonds:

	Other:	
(f.)	Debts and obligations	
	Mortgage:	
	Rent:	
	Loans:	
	Other:	
(g.)	Persons dependent upon you for support	
	Wife's/Husband's Name:	
	Children, if any:	
	Name:	Age:
		Age:
	Other persons:	
	Name:	
	Relationship:	

- 4. I understand that I have a continuing obligation to inform the court of improvement in my financial circumstances that 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. § 4904, relating to unsworn falsification to authorities.

WHEREFORE, Petitioner respectfully prays that the Honorable Court allow the petitioner to proceed in forma pauperis.

Date:_____

Petitioner

Phone Number: _____