



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

COMMONWEALTH OF PENNSYLVANIA

Case No: \_\_\_\_\_

vs.

)  
)  
)  
)  
)  
)  
)

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.
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: \_\_\_\_\_  
Types of work: \_\_\_\_\_

If you are presently unemployed, state:

Date of last employment: \_\_\_\_\_  
Salary or wages per month: \_\_\_\_\_  
Type of work: \_\_\_\_\_  
Reason for being unemployed: \_\_\_\_\_  
\_\_\_\_\_

(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'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; 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: \_\_\_\_\_

\_\_\_\_\_ 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

**Certificate of Compliance**

*I certify that this filing complies with the provisions of the Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts that require filing confidential information and documents differently than non-confidential information and documents.*

Submitted by: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Attorney No. (If applicable): \_\_\_\_\_