

## Instructions for Completing In Forma Pauperis (IFP) Forms

The Petition to Proceed In Forma Pauperis is to be completed if you feel you cannot afford the filing fees associated with your case. If the Judge agrees you cannot afford the fees, based on your answers provided on the IFP, then the fees will be waived. If the Judge feels you can pay the fees you will then need to pay the fees either in the Prothonotary's Office or the Clerk of Courts (both located in the Courthouse on the 1<sup>st</sup> floor).

1. Fill out the IFP to the best of your abilities, completing EVERY line. **LEAVE NO BLANK LINES.**
2. Be sure the top heading is completed EXACTLY THE SAME on all forms. In other words, be sure the Plaintiff is shown as the same and the Defendant is shown as the same on every form.
3. At #1 on page 1, be sure to circle whether you are the Plaintiff or the Defendant. If you were the original defendant, you will continue to stay as such. Meaning, for example, if you are filing for custody modification and you are the defendant under the original filings you are still the defendant. You are still the defendant, but also the petitioner. You are the one who is petitioning the court. The other party is still the plaintiff, but also is now the respondent.
4. **DO NOT** use "N/A" or "Not Applicable". Everything is applicable, even if the answer is "none" or "0". **DO NOT** use dashes or cross anything out.
5. DO USE "none" or "0" if necessary.
6. Be sure to indicate monies coming in and out PER MONTH. For example, if you receive support payments of \$500 per month write this as "\$500/mo."
7. Pay special attention to #3(f) *Debts and Obligations*. This is where you list all your monthly expenses. For example, if you pay a monthly health or car insurance premium, you will want to list this here and under "Other".

**\*\*Failure to FULLY complete the IFP may result in the Judge denying your Petition to Proceed In Forma Pauperis\*\***

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

<i>Plaintiff</i>	:	
	:	
v.	:	<b>CIVIL</b>
	:	
<i>Defendant</i>	:	<b>NO. _____ CD _____</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