		: IN THE COURT OF COMMON PLEAS		
	PLAINTIFF	: OF LACKAWANNA COUNTY		
	VS	: CIVIL ACTION-LAW		
		:		
	DEFENDANT	:CIV		
ORDER				
AND NOW, t	hisday of _			
consideration of the application to proceed in forma pauperis, which was filed by the				
above Plaintiff,		in accordance with Rule No. 1920.62 of the		
Pennsylvania Rules o	of Civil Procedure, IT A	APPEARING TO THE COURT that the said		
is an indigent and una	able to pay the filing fe	es for service of process costs; the request for		
permission to proceed	d in forma pauperis is g	granted.		
		BY THE COURT:		
		J.		

		: IN THE COURT OF COMMON PLEAS
	PLAINTIFF	: OF LACKAWANNA COUNTY
	VS	: CIVIL ACTION-LAW
	DEFENDAN	T :CIV
	<u>PETIT</u>	TION AND AFFIDAVIT
	am unable to pay the fe	n the above matter and because of my financial sees and costs of prosecuting or defending the action
	ole to obtain funds from of litigation.	anyone, including my family and associates, to pay
3. I represent true and c		pelow relating to my ability to pay the fees and costs is
(a)	Name	
	Address	
	Social Security No.	
(b)	Employment	
	If you are presently e	employed, state
	Employer	
	Address	
	Salary or wage per m	nonth

	Type of work
	If you are presently unemployed, state
	Date of last employment
	Salary of 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

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	Salary or wages per month
	Type of Work
	Contributions from children
	Other contributions
(e)	Property Owned
	Cash
	Checking Account
	Saving Account
	Certificate 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 dependant upon you for support
	(Wife) (Husband) Name

	Children if any:			
	NameAge			
	Other Persons			
	Name			
	Relationship			
4.	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.	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.			
	Date			
	Petitioner			