



Bucks County Clerk of Courts Office  
100 North Main Street  
Doylestown, PA 18901  
PH: 215-348-6389

Docket No:

I, \_\_\_\_\_, residing at \_\_\_\_\_, 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-captioned 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 litigation.
3. I represent that the information below relating to my ability to pay the fees and costs is true and correct:

**Employment Information**

If you are presently employed, state employer:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Salary or Wages per Month: \$ \_\_\_\_\_ Type of Work: \_\_\_\_\_

If you are presently unemployed, state:

The date of my last employment was: \_\_\_\_\_  
Salary or Wages per Month: \$ \_\_\_\_\_ Type of Work: \_\_\_\_\_

**Other Income Received Within The Past Twelve Months**

Spouse's name: \_\_\_\_\_

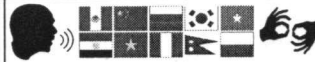
If spouse is presently employed, state employer:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Salary or Wages per Month: \$ \_\_\_\_\_ Type of Work: \_\_\_\_\_

If spouse is presently unemployed, state:

The date of spouse's last employment was: \_\_\_\_\_  
Salary or Wages per Month: \$ \_\_\_\_\_ Type of Work: \_\_\_\_\_

Contributions from Children: \$ \_\_\_\_\_  
Contributions from Parents: \$ \_\_\_\_\_  
Other Contributions: \$ \_\_\_\_\_



Docket No:

**Assets/Property Owned**

Cash:	\$ _____	Certificates of Deposit:	\$ _____
Checking Account:	\$ _____	Stocks and Bonds:	\$ _____
Savings Account:	\$ _____	Other:	\$ _____

**Real Estate:**

Do you own a home or other real property? If so, please provide for each:

Address: \_\_\_\_\_  
 Assessed Value: \$ \_\_\_\_\_ Amount Owed: \$ \_\_\_\_\_

**Motor Vehicle:**

Do you own an automobile? If so, please provide for each:

Make: \_\_\_\_\_  
 Model: \_\_\_\_\_ Year: \_\_\_\_\_  
 Cost: \$ \_\_\_\_\_ Amount Owed: \$ \_\_\_\_\_

**Debts and Obligations**

Rent:	\$ _____	Loans:	\$ _____
Mortgages:	\$ _____	Other:	\$ _____

(Other than those listed above)

**Persons Dependent Upon Me For Support**

Spouse's Name: \_\_\_\_\_

Ages of Minor Children, if any: \_\_\_\_\_

Other Persons (non-minor)

Name: _____	Relationship: _____
Name: _____	Relationship: _____

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.

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. § 4904, relating to unsworn falsification to authorities.

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.

Signature of Petitioner

Date

\_\_\_\_\_

