

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 County will pay the fees for you. 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 1st 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 under "Other."
8. Make sure you sign the forms on the line above "Plaintiff/Defendant." With IFPs there are 2 places for you to sign: bottom of the first page and on page 4.

IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY,
PENNSYLVANIA

CRIMINAL DIVISION

Commonwealth of Pennsylvania

V.

No. _____ of 200____

Defendant

PETITION TO PROCEED IN FORMA PAUPERIS
SUMMARY APPEAL

I, the undersigned, do hereby state under oath:

1. My name is _____

and I live at _____.

2. I am the Defendant in the above action and wish to appeal from a summary conviction but I do not have the financial resources to pay the costs of filing such action.

3. I am not represented by an attorney in this matter.

4. I have attached an affidavit to this petition concerning my financial situation.

5. I request that the Court allow me to file an appeal without paying any costs or fees.

I verify that the statements made in this Petition are true and correct to the best of my knowledge, information and belief. I further understand that any false statements made therein are subject to the penalties of 18 Pa.C.S.A. § 4904 relating to unsworn falsifications to authorities.

Defendant

Date: _____

IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY,
PENNSYLVANIA

CRIMINAL DIVISION

Commonwealth of Pennsylvania :

V. :

No. _____ of 200_____

Defendant

AFFIDAVIT IN SUPPORT OF PETITION TO PROCEED IN FORMA PAUPERIS
SUMMARY APPEAL

1. I am the Defendant in the above matter and because of my financial condition am unable to pay the fees and costs of defending the action or proceeding.
2. I am unable to obtain funds from anyone, including my family and associates, to pay the cost 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: _____

Social Security Number: _____

(b) Employment:

If you are presently employed, state:

Employer: _____

Address: _____

Salary or wager 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: _____

Worker's Compensation: _____

Public Assistance: _____

Other: _____

(d) Other contributions to household support:

(Wife) (Husband) (Other adult living with me)

Name: _____

If your (wife) (husband) (other adult) 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:

Mortgages: _____

Rent: _____

Loans: _____

Other: _____

Persons dependent upon you for support:

(Wife) (Husband) Name: _____

Children, if any:

Name _____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

Other persons: _____

Name: _____

Relationship: _____

4. I understand that the Court may ultimately assess costs, fines, restitution and other fees on me.

5. I verify that the statements made in this affidavit are true and correct to the best of my knowledge, information and belief. I understand that false statements made herein are subject to the penalties of 18 Pa. C.S. § 4904 relating to unsworn falsifications to authorities.

Defendant

Date: _____

7/11/03 IFP affidavit in support - Criminal

IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY,
PENNSYLVANIA

CRIMINAL DIVISION

Commonwealth of Pennsylvania

V.

No. _____ of 200__

Defendant

ORDER

AND NOW, _____, 200__, upon
consideration of the petition filed by the Defendant in this action, and supported
by an affidavit attached thereto the Defendant is granted leave to proceed in
forma pauperis at this time.

The Court may ultimately assess costs, fines, restitution and other fees on
the Defendant.

J.