

How to fill out the Application:

1. Pages 2 through 4 of the IFP application is an affidavit with questions about your background and financial resources. Fill it out truthfully and sign the last page. By signing the affidavit and filing it with the court you are asserting that the information you provide is true and correct to the best of your knowledge, information, and belief. If you intentionally provide false information in a document you submit to the court, you may be subject to criminal charges under 18 PA. C.S.A. § 4904.
2. After you have filled out the affidavit, sign and date the first page of the application.

STEP 2:

Complete the paperwork in the 'Custody Complaint Self-Help Package' and go to the Tioga County Courthouse during normal business hours. Go to the Prothonotary's office and they will assign you a docket number and send you to the Court Administration office, which is located on the second floor of the court house. Court Administration will forward your IFP application to the judge for an initial decision on your IFP application. Sometimes you will get an answer while you wait, other times they will need you to come back later because the judge isn't available to review your application. If your application is granted, you will be allowed to file your custody complaint without paying the filing fee. If your application is rejected, you will need to pay the filing fee before you file your complaint. Once you have the judge's decision on your IFP application, you will need to take all of your papers back to the Prothonotary's office on the first floor of the court house for filing.

STEP 4:

Follow the instructions in the 'Custody Complaint Self-Help Package' to file your custody complaint.

PLEASE BE AWARE THAT IF YOU HIRE AN ATTORNEY AFTER YOUR IFP APPLICATION HAS BEEN APPROVED, THE COURT WILL PROBABLY REQUIRE YOU TO PAY THE FILING FEE. THE ONLY EXCEPTION IS IF YOUR ATTORNEY IS REPRESENTING YOU WITHOUT COST, AND IF YOUR ATTORNEY FILED A NOTICE WITH THE COURT STATING THAT THEY ARE REPRESENTING YOU WITHOUT COST. IT IS YOUR DUTY TO INFORM THE COURT IF YOUR SITUATION CHANGES AND YOU CAN AFFORD TO PAY THE FILING FEE, OR IF YOU HAVE HIRED AN ATTORNEY TO REPRESENT YOU AFTER YOUR IFP APPLICATION IS GRANTED.

ADDITIONAL CONTENTS OF THIS PACKAGE:

1. PETITION TO PROCEED IN FORMA PAUPERIS (WITHOUT COSTS) (4 PAGES)

IN THE COURT OF COMMON PLEAS
OF TIOGA COUNTY, PENNSYLVANIA

Plaintiff

v.

Defendant

:
:
:
:
:
:
:

NO: ____ FS ____

CIVIL ACTION - CUSTODY

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PETITION TO PROCEED IN FORMA PAUPERIS

TO THE HONORABLE JUDGE OF THE ABOVE-REFERENCED COURT:

Please allow the undersigned Petitioner to proceed *in forma pauperis*. An affidavit in support of this Petition is attached hereto.

Date: _____

Petitioner's Signature (pro se)

ORDER

AND NOW, this ____ day of _____, 20__, pursuant to Pa. R. Civ. P. 240(d), and upon consideration of the above Petition to proceed *in forma pauperis* and the Affidavit in support thereof, said Application to proceed without payment of costs is hereby

GRANTED

DENIED

BY THE COURT,

_____, P.J.

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

Plaintiff

v.

Defendant

:
:
:
:
:
:
:

NO: ____ FS ____

CIVIL ACTION - CUSTODY

.....

**AFFIDAVIT IN SUPPORT OF
PETITION TO PROCEED IN FORMA PAUPERIS**

1. The Petitioner's name and address are as follows:

Name: _____

Address: _____

2. The Petitioner is unable to obtain funds to pay the costs of this action.

3. The Petitioner's financial status is as follows:

a) Employment status: EMPLOYED UNEMPLOYED

IF EMPLOYED:

Current Employer: _____

Employer's Address: _____

Salary or Wages per Month: _____

Position/Duties: _____

IF UNEMPLOYED:

Date of Last Employment: _____

Salary or Wages per Month: _____

Position/Duties: _____

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b) Other sources of income within the last year:

Social Security Payments: _____
Support Payments: _____
Public Assistance: _____
Pensions or Annuities: _____
Investments: _____
Unemployment Compensation: _____
Worker's Compensation: _____
Other: _____

c) Other contributions to household support:

Spouse's Name: _____
Spouse's Employer: _____
Spouse's earnings per Month: _____
Spouse's Type of Work: _____
Contributions from Children: _____
Contributions from Parents: _____
Other Contributions: _____

d) Property Owned:

Cash: _____
Checking Account: _____
Savings Account: _____
Certificates of Deposit: _____
Real Estate (including home): _____
Motor Vehicles
(make, model, year, and cost): _____

e) Debts and Obligations:

Mortgage (per month): _____
Rent (per month): _____
Loans (per month): _____
Other: _____

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f) Persons dependent on Petitioner
for Support:

Children (name and age): _____

Other Persons
(name and relationship): _____

4. The Petitioner understands that they have a continuing obligation to inform the court of any improvement in their financial circumstances which would permit them to pay the costs incurred herein.
5. The Petitioner understands that if they hire an attorney after their Petition to Proceed in Forma Pauperis is granted, then the Petitioner has an obligation to inform the court and pay the filing fee and any other costs, unless the attorney they hire files a written notice that the attorney is representing the Petitioner at no cost to the Petitioner.

I verify that the statements made in this Petition to Proceed in Forma Pauperis and attached Affidavit are true and correct to the best of my knowledge, information, and belief. I understand that false statements herein are made subject to the penalties of 18 PA. C.S.A. § 4904 relating to unsworn falsification to authorities.

Date: _____

Petitioner's Signature (pro se)