

**IN THE COURT OF COMMON PLEAS OF ADAMS COUNTY, PENNSYLVANIA
CRIMINAL**

COMMONWEALTH OF PENNSYLVANIA

NO. _____

v.

APPLICATION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

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. The proceedings are presently at the following stage:
 - (a) _____ Pleading
 - (b) _____ Trial
 - (c) _____ Appeal
 - (d) _____ Other (explain) _____
3. I am unable to obtain funds from anyone, including my family and associates, to pay the costs of litigation.
4. 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 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

Name of Spouse: _____
If your spouse 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 dependant upon you for support

Spouse's name: _____
Children, if any:
Name: _____ Age: _____

Other persons:

Name: _____
Relationship: _____

5. 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.
6. 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. Section 4904, relating to unsworn falsification to authorities.

Date: _____

Print Name: _____

Signature: _____

Petitioner

ORDER OF COURT

AND NOW, this _____ day of _____, 20____, the
Application For Leave to Proceed in Forma Pauperis is _____.

BY THE COURT,

P.J.