

HOW TO FILE AN IN FORMA PAUPERIS PETITION

JUDGE HENRY S. KENDERDINE, JR.



COURT SELF HELP CENTER

Disclaimer by the Court of Common Pleas of Lancaster County, Pennsylvania

Neither the staff in the Center nor the staff in any Court office will be able to give you legal advice or help you fill out/complete the forms. The information in the packets is not a substitute for professional legal advice. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. If you want to obtain the services of an attorney but do not know whom to contact, you may call the Lawyer Referral service at (717) 393-0737.

08/10/18

STOP!!!

YOU MUST READ THIS INFORMATION *BEFORE* YOU START TO FILL OUT ANY FORMS IN THE PACKET!

Beginning on January 6, 2018, all filings in the Lancaster County Court of Common Pleas must be in compliance with the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* and Lancaster County Rules of Judicial Administration, Rule 520. There are links to the Policy and the Rule on the Court's website, www.court.co.lancaster.pa.us

How does this impact my filing?

First, beginning on January 6, 2018, if the document you are filing does NOT contain any Confidential Information or have Confidential Documents attached (see list below), you must file a Certificate of Compliance with your filing. A copy of a Certification is attached. (Form 1)

Second, if the document you are filing contains any Confidential Information, you must complete and file the Confidential Information Form (CIF); a copy of this form is attached. (Form 2) Under Section 7 of the Public Access Policy the information listed below is considered Confidential Information, and it shall not be included on any form included in the packet. If the forms in your packet require you to include any of this information, you must put the information on the CIF and use the Alternative Reference suggested on the CIF on the form in the packet. **DO NOT PUT THE CONFIDENTIAL INFORMATION ON THE FORM ITSELF; THE CONFIDENTIAL INFORMATION MUST APPEAR ONLY ON THE CIF.**

1. Social Security Numbers
2. Financial Account Numbers
3. Driver License Numbers
4. State Identification (SID) Numbers
5. Minors' Names and Dates of Birth
6. Abuse Victim's Address and other Contact Information, including employer's name, address and work schedule, in family court actions as defined by Pa. R.C.P. No. 1931(b) except for victim's name

Finally, if you have attached any of the following documents to your filing, you must complete the Confidential Document form (Form 3) and file it with your pleading:

1. Financial Source Documents
2. Minors Educational Records
3. Medical/Psychological Records
4. Children and Youth Services' Records
5. Marital Property Inventory and Pre-Trial Statement (see Pa.R.C.P. No. 1920.33)
6. Income and Expense Statement (see Pa. R.C.P. No. 1910.27(c))
7. Agreement between the Parties (see 23 Pa.C.S. sect 3105)

The Court or custodian is not required to review or redact any filed document for compliance with this policy. Failure to comply may lead to imposed sanctions.

(Rev. 7/1/2018)

CERTIFICATE OF COMPLIANCE

Docket No. _____

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that requires filing confidential information and documents differently than non-confidential information and documents.

Signature _____

(Attorney or pro se litigant)

Print Name _____

Attorney No. (if applicable) _____

**CONFIDENTIAL
INFORMATION
FORM**



Case Records Public Access Policy of the Unified Judicial System of Pennsylvania
204 Pa. Code § 213.81
www.pacourts.us/public-records

(Party name as displayed in case caption)

Docket/Case No.

Vs.

(Party name as displayed in case caption)

Court

This form is associated with the pleading titled _____, dated _____.

Pursuant to the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*, the Confidential Information Form shall accompany a filing where confidential information is **required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter**. This form, and any additional pages, shall remain confidential, except that it shall be available to the parties, counsel of record, the court, and the custodian. This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

| This Information Pertains to: | Confidential Information: | References in Filing: |
|--|---|---|
| <p>_____ (full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of ____ and the full name of</p> <p>_____ (full name of minor)</p> <p>and date of birth: _____</p> | <p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p> | <p>Alternative Reference: SSN 1</p> <p>Alternative Reference: FAN 1</p> <p>Alternative Reference: DLN 1</p> <p>Alternative Reference: SID 1</p> |
| <p>_____ (full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of ____ and the full name of</p> <p>_____ (full name of minor)</p> <p>and date of birth: _____</p> | <p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p> | <p>Alternative Reference: SSN 2</p> <p>Alternative Reference: FAN 2</p> <p>Alternative Reference: DLN 2</p> <p>Alternative Reference: SID 2</p> |

**CONFIDENTIAL
INFORMATION
FORM**



Additional page(s) attached. _____ total pages are attached to this filing.

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Signature of Attorney or Unrepresented Party

Date

Name: _____

Attorney Number: (if applicable) _____

Address: _____

Telephone: _____

Email: _____

NOTE: Parties and attorney of record in a case will have access to this Confidential Information Form. Confidentiality of this information must be maintained.

**CONFIDENTIAL
INFORMATION
FORM**



Additional page (if necessary)

| This Information Pertains to: | Confidential Information: | References in Filing: |
|---|---|---|
| <p>_____ (full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of</p> <p>_____ (full name of minor)</p> <p>and date of birth: _____</p> | <p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p> | <p>Alternative Reference: SSN ____</p> <p>Alternative Reference: FAN ____</p> <p>Alternative Reference: DLN ____</p> <p>Alternative Reference: SID ____</p> |
| <p>_____ (full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of</p> <p>_____ (full name of minor)</p> <p>and date of birth: _____</p> | <p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p> | <p>Alternative Reference: SSN ____</p> <p>Alternative Reference: FAN ____</p> <p>Alternative Reference: DLN ____</p> <p>Alternative Reference: SID ____</p> |
| <p>_____ (full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of</p> <p>_____ (full name of minor)</p> <p>and date of birth: _____</p> | <p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p> | <p>Alternative Reference: SSN ____</p> <p>Alternative Reference: FAN ____</p> <p>Alternative Reference: DLN ____</p> <p>Alternative Reference: SID ____</p> |

**CONFIDENTIAL
INFORMATION
FORM**



Instructions for Completing the Confidential Information Form

The following information is confidential and shall not be included in any document filed with a court or custodian, except on a Confidential Information Form filed contemporaneously with the document:

1. Social Security Numbers
2. Financial Account Numbers, except an active financial account number may be identified by the last four digits when the financial account is the subject of the case and cannot otherwise be identified. “Financial Account Numbers” include financial institution account numbers, debit and credit card numbers, and methods of authentication used to secure accounts such as personal identification numbers, user names and passwords.
3. Driver License Numbers
4. State Identification (SID) Numbers
5. Minors’ names and dates of birth except when a minor is charged as a defendant in a criminal matter (see 42 Pa.C.S. § 6355). “Minor” is a person under the age of eighteen.
6. Abuse victim’s address and other contact information, including employer’s name, address and work schedule, in family court actions as defined by Pa.R.C.P. No. 1931(a), except for victim’s name. “Abuse Victim” is a person for whom a protection order has been granted by a court pursuant to Pa.R.C.P. No. 1901 et seq. and 23 Pa.C.S. § 6101 et seq. or Pa.R.C.P. No. 1951 et seq. and 42 Pa.C.S. § 62A01 et seq. **If necessary, this information must be provided on the separate Abuse Victim Addendum. Please note there are separate instructions for the completion of the Addendum located on the form.**

Please note this form does not need to be filed in types of cases that are sealed or exempted from public access pursuant to applicable authority (e.g. juvenile, adoption, etc.).

- **The best way to protect confidential information is not to provide it to the court. Therefore, only provide confidential information to the court when it is required by law, ordered by the court or is otherwise necessary to effect the disposition of a matter.**
- Do not include confidential information in any other document filed with the court under this docket.
- If you need to refer to a piece of confidential information in a document, use the alternate references. If you need to attach additional pages, sequentially number each alternate reference – i.e. SSN 3, SSN 4, etc.
- This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

A court or custodian is not required to review or redact any filed document for compliance with the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*. A party’s or attorney’s failure to comply with this section shall not affect access to case records that are otherwise accessible.

If a filed document fails to comply with the requirements of the above referenced policy, a court of record may, upon motion or its own initiative, with or without a hearing, order the filed document sealed, redacted, amended or any combination thereof; a magisterial district court may, upon request or its own initiative, redact, amend or both. A court of record may impose sanctions, including costs necessary to prepare a compliant document for filing in accordance with applicable authority.

**CONFIDENTIAL
INFORMATION
FORM**



Abuse Victim Addendum

Instructions for Completing the Abuse Victim Addendum: The Abuse Victim Addendum shall accompany a filing where confidential information is being provided by an abuse victim, as defined in this policy, **in family court actions** (see Pa.R.C.P. No. 1931(a)), **as required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter.** This addendum, and any additional pages, shall only be provided to the court and shall remain confidential. The best way to protect confidential information is not to provide it to the court. Therefore, only provide confidential information to the court when it is required by law, ordered by the court or is otherwise necessary to effect the disposition of a matter.

| Type of Family Court Action | | |
|---|--|--|
| Divorce, Annulment, Dissolution of Marriage | Child Custody | |
| Support | Paternity | Protection from Abuse |
| This Information Pertains to: | Confidential Information: | References in Filing: |
| <hr/> (full name of abuse victim) | AV Address: <hr/> | Alternative Reference: AV 1 Address |
| <hr/> Docket/Case No. of Protection Order | AV Employer's Name & Address: <hr/> | Alternative Reference: AV 1 Employer's Name & Address |
| <hr/> Court/County | AV Work Schedule: <hr/> | Alternative Reference: AV 1 Work Schedule |
| | AV Other contact information: <hr/> | Alternative Reference: AV 1 Other contact information |

Attach additional page(s) if necessary.

**CONFIDENTIAL
INFORMATION
FORM**



Abuse Victim Addendum

Additional page (if necessary)

| Type of Family Court Action | | |
|---|--|---|
| Divorce, Annulment, Dissolution of Marriage | Child Custody | |
| Support | Paternity | Protection from Abuse |
| This Information Pertains to: | Confidential Information: | References in Filing: |
| <hr/> (full name of abuse victim) | AV Address: <hr/> | Alternative Reference: AV __ Address |
| <hr/> Docket/Case No. of Protection Order | AV Employer's Name & Address: <hr/> | Alternative Reference: AV __ Employer's Name & Address |
| <hr/> Court/County | AV Work Schedule: <hr/> | Alternative Reference: AV __ Work Schedule |
| | AV Other contact information: <hr/> | Alternative Reference: AV __ Other contact information |

| Type of Family Court Action | | |
|---|--|---|
| Divorce, Annulment, Dissolution of Marriage | Child Custody | |
| Support | Paternity | Protection from Abuse |
| This Information Pertains to: | Confidential Information: | References in Filing: |
| <hr/> (full name of abuse victim) | AV Address: <hr/> | Alternative Reference: AV __ Address |
| <hr/> Docket/Case No. of Protection Order | AV Employer's Name & Address: <hr/> | Alternative Reference: AV __ Employer's Name & Address |
| <hr/> Court/County | AV Work Schedule: <hr/> | Alternative Reference: AV __ Work Schedule |
| | AV Other contact information: <hr/> | Alternative Reference: AV __ Other contact information |

**CONFIDENTIAL
DOCUMENT FORM**



Case Records Public Access Policy of the Unified Judicial System of Pennsylvania

204 Pa. Code § 213.81

www.pacourts.us/public-records

(Party name as displayed in case caption)

Docket/Case No.

Vs.

(Party name as displayed in case caption)

Court

This form is associated with the pleading titled _____, dated _____, _____.

Pursuant to the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*, the Confidential Document Form shall accompany a filing where a confidential document is required by law, ordered by the court, or is otherwise necessary to effect the disposition of a matter. This form shall be accessible to the public, however the documents attached shall not be publicly accessible, except as ordered by a court. The documents attached will be available to the parties, counsel of record, the court, and the custodian.

Please only attach documents necessary for the purposes of this case. Complete the entire form and check all that apply. This form and any additional pages must be served on all unrepresented parties and counsel of record.

| Type of Confidential Document | Paragraph, page, etc. where the confidential document is referenced in the filing: |
|---|--|
| Financial Source Documents Tax Returns and schedules | |
| W-2 forms and schedules including 1099 forms or similar documents | |
| Wage stubs, earning statements, or other similar documents | |
| Credit card statements | |
| Financial institution statements (e.g., investment/bank statements) | |
| Check registers | |
| Checks or equivalent | |
| Loan application documents | |
| Minors' educational records | |
| Medical/Psychological records | |
| Children and Youth Services' records | |
| Marital Property Inventory and Pre-Trial Statement as provided in Pa.R.C.P. No. 1920.33 | |
| Income and Expense Statement as provided in Pa.R.C.P. No. 1910.27(c) | |
| Agreements between the parties as used in 23 Pa.C.S. §3105 | |

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Signature of Attorney or Unrepresented Party

Date

Name: _____

Attorney Number: (if applicable) _____

Address: _____

Telephone: _____

Email: _____



Instructions for Completing the Confidential Document Form

The following documents are confidential and shall be filed with a court or custodian with the “Confidential Document Form”:

1. Financial Source Documents as listed on the form
2. Minors’ educational records
3. Medical/Psychological records are defined as “records relating to the past, present, or future physical or mental health or condition of an individual”
4. Children and Youth Services’ records
5. Marital Property Inventory and Pre-Trial Statement as provided in Pa.R.C.P. No. 1920.33
6. Income and Expense Statement as provided in Pa.R.C.P. No. 1910.27(c)
7. Agreements between the parties as used in 23 Pa.C.S. § 3105

For each confidential document, list the paragraph, page, etc. where the document is referenced in the filing. Please note, this form does not need to be filed in types of cases that are sealed or exempted from public access pursuant to applicable authority (e.g. juvenile, adoption, etc.)

- **Please only attach documents necessary for the purposes of this case.**
- Complete the entire form and check all that apply.
- This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

A court or custodian is not required to review or redact any filed document for compliance with the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*. A party’s or attorney’s failure to comply shall not affect access to case records that are otherwise accessible.

If a filed document fails to comply with the above referenced policy, a court of record may, upon motion or its own initiative, with or without a hearing, order the filed document sealed; a magisterial district court may do so upon request or its own initiative. A court of record may impose sanctions, including costs necessary to prepare a compliant document for filing in accordance with applicable authority.

IN FORMA PAUPERIS

If a party believes that he/she is without the financial resources to pay the costs of a court action or proceeding, he/she may apply for *in forma pauperis (IFP)* status.

In order to qualify for *IFP* status, a petition must be completed in its entirety and submitted to the appropriate filing office (Prothonotary, Clerk of Courts or Register of Wills office) with a proposed Order attached. There should be no blank lines on the petition when it is submitted; if there are categories of information on the form that do not relate to you, please put a "0" on the line or write "not applicable" on the line.

If the court grants the *IFP* status, it will apply **only** to the costs and fees associated with the related action or proceeding; the status will not apply to any other court proceedings that the party may be involved with.

A copy of the necessary *IFP* petition is included in this packet. If the petition relates to a no-fault divorce proceedings, please attach the Order on pgs. 6-7 of the packet to the petition. For all other kinds of court actions, please use the shorter, one paragraph Order on pg. 5 of the packet.

No staff members of any Court or Court-related office are legally permitted to provide you with any advice or assistance with the preparation or filing of this or any other petition.



Purdon's Pennsylvania Statutes and Consolidated Statutes Annotated [Currentness](#)

Purdon's Pennsylvania Consolidated Statutes Annotated

Pennsylvania Rules of Civil Procedure ([Refs & Annos](#))

☞ Business of Courts ([Refs & Annos](#))

➔Rule 240. In Forma Pauperis

(a) This rule shall apply to all civil actions and proceedings except actions pursuant to the Protection From Abuse Act.

Note: The term "all civil actions and proceedings" includes all domestic relations actions except those brought pursuant to the Protection From Abuse Act, which are governed by [23 Pa.C.S. § 6106](#).

(b) A party who is without financial resources to pay the costs of litigation is entitled to proceed in forma pauperis.

(c) Except as provided by subdivision (d), the party shall file a petition and an affidavit in the form prescribed by subdivision (h). The petition may not be filed prior to the commencement of an action or the taking of an appeal.

(1)(i) If the petition is filed simultaneously with the commencement of the action or with the taking of the appeal, the prothonotary shall docket the action and petition or shall accept the appeal and petition without the payment of any filing fee.

(ii) If the court shall thereafter deny the petition, the petitioner shall pay the filing fee for commencing the action or taking the appeal. A party required to pay such fee may not without leave of court take any further steps in the action or appeal so long as such fee remains unpaid. Not sooner than ten days after notice of the denial of the petition pursuant to Rule 236, the prothonotary shall enter a judgment of non pros in the action or strike the appeal if the fee remains unpaid. The action or appeal shall be reinstated only by the court for good cause shown.

(2) If the action is commenced or the appeal is taken without the simultaneous filing of a petition, the appropriate filing fee must be paid and shall not be refunded if a petition is thereafter filed and granted.

(3) The court shall act promptly upon the petition and shall enter its order within twenty days from the date of the filing of the petition. If the petition is denied, in whole or in part, the court shall briefly state its reasons.

(d)(1) If the party is represented by an attorney, the prothonotary shall allow the party to proceed in forma pauperis upon the filing of a praecipe which contains a certification by the attorney that he or she is providing free legal service to the party and believes the party is unable to pay the costs.

(2) The praecipe shall be substantially in the form prescribed by subdivision (i).

(e) A party permitted to proceed in forma pauperis has a continuing obligation to inform the court of improvement in the party's financial circumstances which will enable the party to pay costs.

(f) A party permitted to proceed in forma pauperis shall not be required to

(1) pay any cost or fee imposed or authorized by Act of Assembly or general rule which is payable to any court or prothonotary or any public officer or employee, or

(2) post bond or other security for costs as a condition for commencing an action or taking an appeal.

(g) If there is a monetary recovery by judgment or settlement in favor of the party permitted to proceed in forma pauperis, the exonerated fees and costs shall be taxed as costs and paid to the prothonotary by the party paying the monetary recovery. In no event shall the exonerated fees and costs be paid to the indigent party.

IN THE COURT OF COMMON PLEAS OF LANCASTER COUNTY, PENNSYLVANIA

vs.

No. CI-

ORDER

AND NOW, this _____ day of _____, 20 _____, upon consideration of the attached Petition and Affidavit of Financial Status, it is hereby Ordered that the Petitioner, _____, is permitted to proceed with the filing of his/her action or appeal In Forma Pauperis, and shall not be required to pay the costs or fees payable in connection with such matter, but conditioned upon his/her payment of such costs from the proceeds of an financial recovery in this case.

BY THE COURT:

J.

CSHC

IN THE COURT OF COMMON PLEAS OF LANCASTER COUNTY, PENNSYLVANIA

V.

CI-

ORDER

AND NOW, this ____ day of _____, 20 ____, upon consideration of the attached Petition and Affidavit of financial Status, it is hereby Ordered that the Petitioner, _____, is permitted to proceed with the filing of a no-fault divorce action In Forma Pauperis, and shall not be required to pay the costs or fees payable in connection with such matter, but conditioned upon his/her payment of such costs from the proceeds of a financial recovery in this case, in accordance with Pa.R.C.P. 240(g).

This means that petitioner may file a no-fault divorce action without prepayment of filing fees for such an action, but that In Forma Pauperis status does not extend to Divorce Masters' fees or to Court Reporters' fees or fees for filing related claims other than spousal support and alimony pendente lite (temporary alimony pending litigation). Furthermore, if the parties reach their own agreement about the division of marital assets, or if related claims for equitable distribution or post-divorce alimony or alimony pendente lite is/are filed, the Prothonotary shall not enter a divorce decree until one of the following occurs:

1) A Divorce Master's recommendation as to responsibility for court costs;

OR

2) Both parties appear in the Family Business Court of the judge assigned to their case (and if applicable, present a copy of any property settlement agreement), and that judge makes a determination regarding responsibility for costs.

BY THE COURT:

J.

ATTEST:

cc: Prothonotary
Plaintiff
Defendant

CSHC

- c. Other income within last 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: _____
- 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 and bonds: _____
- Other: _____

f. Debts and Obligations:
Mortgage: _____
Rent: _____
Loans: _____
Other: _____

g. Persons dependent upon you for support:
Wife/husband name: _____
Children, if any:
Initials: _____ Age: _____

Other persons:
Name: _____
Relationship: _____

- 4. 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.

- 5. I verify that statement 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

CSHC