



**COURT OF COMMON PLEAS OF WASHINGTON COUNTY  
TWENTY-SEVENTH JUDICIAL DISTRICT OF PENNSYLVANIA  
DOMESTIC RELATIONS SECTION**

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Family Court Center, 29 W. Cherry Ave Ste 311  
WASHINGTON, PENNSYLVANIA 15301

**INSTRUCTIONS ON PRESENTING A MOTION**

1. Read Judge's [Standard Operating Procedures](#) for further instructions regarding the presentation of motions and general courtroom procedure.
2. Complete the attached Motion, Notice of Presentation, Form, and top portion of the Court Order. Leave no blank lines. Write "not applicable" or "0" where appropriate.
3. Follow the 2016-1 Duty to Meet & Confer. This includes the **Certificate of Compliance with Administrative Order 2016-1**.
4. **Keep the original** but you **must** provide copies of all forms to the opposing party and their attorney and to the Domestic Relations Office. Bring the original to Motions Court.
5. You must give the opposing parties and their attorneys 5 days' notice before court.
6. A copy of the Motion must be given to the **Judge's office by noon on the Monday prior to you presenting the Motion**.
7. Motions Court:  
**Enter the Courtroom and have a seat until the Judge calls your name.**  
Follow all directions given by the court staff; this is a formal court proceeding.
8. Once the Judge signs the Order, you must give it the Domestic Relations Office in Suite 311 of the Family Court Center to proceed.

**NOTICE OF PRESENTATION**

NOTICE IS HEREBY GIVEN that the within Motion will be presented to the Honorable Valarie Costanzo, Washington County Courthouse, Courtroom

Number **3**, 1 South Main Street, Washington, PA 15301, on \_\_\_\_\_

at \_\_\_\_\_ or as soon thereafter as suits the convenience of the Court.

**CERTIFICATE OF SERVICE**

I, \_\_\_\_\_, hereby certify that a true and correct copy of the attached Petition has been served this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by U.S., first-class mail, postage pre-paid, to the opposing party at the following address:

NAME AND ADDRESS OF OTHER PARTY

NAME AND ADDRESS OF  
ATTORNEY FOR OTHER PARTY

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
(signature)

IN THE COURT OF COMMON PLEAS OF WASHINGTON COUNTY, PENNSYLVANIA  
DOMESTIC RELATIONS SECTION

\_\_\_\_\_, )  
Plaintiff, ) No. \_\_\_\_\_ )  
 ) )  
v. ) PACSES ID: \_\_\_\_\_ )  
 ) )  
\_\_\_\_\_, )  
Defendant, )

**PETITION TO PROCEED IN FORMA PAUPERIS**

1. I am the plaintiff/defendant in the above matter and, because of my financial Condition, am unable to pay the fees and costs of prosecuting or defending the action or proceeding.

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.

(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 (12) 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) 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: \_\_\_\_\_

Saving 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 dependent upon you for support**

(Wife) (Husband) Name: \_\_\_\_\_

Children, if any:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ 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 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. 4904, relating to unsworn falsification to authorities.

Date: \_\_\_\_\_

\_\_\_\_\_  
Petitioner