





(d) Any other contributions to household support?  YES  NO If yes, complete the following --  
 (Wife) (Husband) (Significant Other) Name: \_\_\_\_\_  
 Is your (wife)(husband)(significant other) employed? See Below --  
 Employer: \_\_\_\_\_  
 Salary or wages per month: \$ \_\_\_\_\_  
 Type of work: \_\_\_\_\_  
 Contributions from children/parents: \$ \_\_\_\_\_  
 Other contributions: \$ \_\_\_\_\_

(e) Do you own any property as listed below?  YES  NO If yes, complete the following --  
 Cash: \$ \_\_\_\_\_ Checking Account: \$ \_\_\_\_\_  
 Savings Account: \$ \_\_\_\_\_ Certificates of Deposit: \$ \_\_\_\_\_  
 Real Estate (including home): \$ \_\_\_\_\_  
 Motor Vehicle: Make: \_\_\_\_\_ Year: \_\_\_\_\_ Current Value: \$ \_\_\_\_\_  
 Amount owed (if any) on Vehicle: \$ \_\_\_\_\_  
 Stocks: \$ \_\_\_\_\_ Bonds: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

(f) What are your Debts and/or Obligations?  
 Mortgage: \$ \_\_\_\_\_ Rent: \$ \_\_\_\_\_  
 Loans: \$ \_\_\_\_\_ (List all monthly charges, utilities, etc. below)  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_  
 \$ \_\_\_\_\_ \$ \_\_\_\_\_

(g) Persons dependent upon you for support:  
 (Wife)(Husband) Name: \_\_\_\_\_  
 Children, if any:  
 Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Other person(s):  
 Name(s): \_\_\_\_\_  
 Relationship: \_\_\_\_\_

4. I understand that I have a continued 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

COMPLETE EVERY QUESTION LISTED. IF IT DOES NOT APPLY TO YOUR SITUATION, MARK IT "N/A". FAILURE TO DO SO MAY RESULT IN A REJECTED IN FORMA PAUPERIS.

