



BRADFORD COUNTY, PENNSYLVANIA

PRO SE
CUSTODY PACKET

**THIS IS NOT LEGAL ADVICE! THE COURT CAN NOT GIVE YOU LEGAL ADVICE.
YOU SHOULD OBTAIN THE SERVICES OF A LAWYER FOR LEGAL ADVICE.
THIS IS ONLY TO ASSIST YOU IN FILING THE INITIAL COMPLAINT.**

**INSTRUCTIONS FOR PRO SE CUSTODY ACTIONS
IN BRADFORD COUNTY, PENNSYLVANIA**

1. Read and fill out all forms **COMPLETELY!**
 - 1A - You are the **PLAINTIFF** (the person bringing the action).
 - 1B - The **DEFENDANT** is the person you are bringing the action against, usually the other parent.
2. Read the attached **Confidential Information From and Confidential Document Forms COMPLETELY AND CAREFULLY!**
*****You are responsible for protecting your private information and the information pertaining to your child(ren).**
3. If you do not think you can pay the filing fee, you can ask the Court to waive the costs. The form you need to fill out is the Petition for In Forma Pauperis, included in this packet. The Court will review your petition and decide whether or not you will have to pay the costs of filing the action.
4. Take all completed forms, plus two (2) copies of each form, AND a large self-addressed stamped envelope to the Prothonotary's Office, located on the second floor of the Bradford County Court House, 301 Main Street, Towanda, Pennsylvania. Be certain that your self-addressed stamped envelope is large enough and contains sufficient postage to mail two (2) copies of the forms to you.
5. Once the forms are reviewed and dates are scheduled by Court officials, they will be returned to the Prothonotary. Two (2) copies with the scheduled dates will be returned to you in the self-addressed stamped envelope that you provided. If you do not receive two (2) copies within two (2) weeks of filing, it is **YOUR** responsibility to contact the Prothonotary's Office and/or the Court to determine the status of your forms.
6. The Plaintiff **MUST** file and serve with the Complaint the attached Criminal Record/Abuse History Verification regarding any criminal or abuse history of the Plaintiff and anyone living in the Plaintiff's household. You **MUST ALSO** attach a blank Criminal Record/Abuse History Verification form to the Complaint served upon the Defendant.

NOTE: There are two copies of the Criminal Record/Abuse History Verification form attached to the packet. Please fill out one copy with regard to yourself and anyone in your household. Leave the other copy blank. File your completed Criminal Record/Abuse History Verification with your Complaint in the Prothonotary's Office. The blank form must be served

upon the Defendant.

7. **YOU ARE RESPONSIBLE** for Service of the Complaint, Notice, Order, your filed Criminal Record/Abuse History Verification, a blank Criminal Record/Abuse History Verification, and the Education Program for Separated Parents (EPSP) brochure upon the opposing party.
8. Service can be made by the Bradford County Sheriff's Department. Their office is also located on the second floor of the Bradford County Court House at 301 Main Street, Towanda, Pennsylvania. There is a fee for service by the Sheriff's Department, which you will be responsible for paying unless the costs are waived by the Court.
9. You may also serve the Complaint, Order, and all other required forms by CERTIFIED MAIL. To do so, **YOU MUST** send the Complaint, Order, and all other required forms by **CERTIFIED MAIL, RETURN RECEIPT REQUESTED, TO BE SIGNED BY THE ADDRESSEE ONLY**. For further instructions on this procedure, contact your local post office. No other service by mail will constitute proper service.
10. **DO NOT personally deliver the forms** to the Defendant yourself. This would not be proper service according to the Court rules because you are a party to the lawsuit.
11. **Service must be made within thirty (30) days from the date of filing the Complaint and Order with the Prothonotary's Office.**
12. Proof of Service **MUST BE BROUGHT TO THE PRELIMINARY CUSTODY CONFERENCE**, which will be scheduled by the Court, **OR FILED IN THE PROTHONOTARY'S OFFICE** prior to the conference. You **MUST** be able to show the Court that service was made and on what date and time.

BRADFORD COUNTY PRO SE CUSTODY PACKET CHECKLIST

This checklist is for YOUR convenience, upon completing the Pro Se Packet, refer to this checklist BEFORE filing with the Prothonotary's office.

DID YOU...

- Fill out all required forms?
- Complete the optional *in forma pauperis* petition IF APPLICABLE?
- Make two (2) copies of the original forms?
- Prepare one (1) large self-addressed and stamped envelope?
- Complete the Criminal Record and Abuse form?
- Leave one copy of the Criminal Record and Abuse form blank to be served upon the defendant?
- Gather copies of all forms in instruction number six (6) from above?
- After filing with the Prothonotary and upon receipt of the forms as described in instruction four (4) did you properly serve the defendant by either:
 - Bradford County Sherriff's Department? (Instruction 7)
 - Certified Mail? (Instruction 8)

KEY CUSTODY DEFINITIONS

PLAINTIFF –	The person bringing the custody action.
DEFENDANT –	The person you are bringing the action against (usually the other parent).
LEGAL CUSTODY –	The legal right to make major decisions affecting the best interests of the minor on behalf of the child, including, but not limited to, medical, religious, and educational decisions.
PHYSICAL CUSTODY –	The actual physical possession and control of a child.
SOLE PHYSICAL CUSTODY –	The right of one individual to exclusive physical custody of the child.
SHARED PHYSICAL CUSTODY –	The right of more than one individual to assume physical custody of the child, each

having significant periods of physical custodial time with the child.

PRIMARY PHYSICAL CUSTODY –

The right to assume physical custody of the child for the majority of the time.

PARTIAL PHYSICAL CUSTODY –

The right to assume physical custody of the child for less than a majority of the time.

SUPERVISED PHYSICAL CUSTODY -

Custodial time during which an agency or an adult designated by the court or agreed upon by the parties monitors the interaction between the child and the individual with those rights.

**CONFIDENTIAL
INFORMATION
FORM**



**APPELLATE/TRIAL COURT
CASE RECORDS**

*Public Access Policy of the Unified Judicial System of Pennsylvania:
Case Records of the Appellate and Trial Courts
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 *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts*, 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): N/A</p> <p>Financial Account Number (FAN): N/A</p> <p>Driver's License Number (DLN): N/A</p> <p>State of Issuance: N/A</p> <p>State Identification Number (SID): N/A</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): N/A</p> <p>Financial Account Number (FAN): N/A</p> <p>Driver's License Number (DLN): N/A</p> <p>State of Issuance: N/A</p> <p>State Identification Number (SID): N/A</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**



**APPELLATE/TRIAL COURT
CASE RECORDS**

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

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* 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**



**APPELLATE/TRIAL COURT
CASE RECORDS**

Additional page (if necessary)

This Information Pertains to:	Confidential Information:	References in Filing:
<p>(full name of adult)</p> <p style="text-align: center;">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): N/A</p> <p>Financial Account Number (FAN): N/A</p> <p>Driver's License Number (DLN): N/A</p> <p>State of Issuance: N/A</p> <p>State Identification Number (SID): N/A</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 style="text-align: center;">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): N/A</p> <p>Financial Account Number (FAN): N/A</p> <p>Driver's License Number (DLN): N/A</p> <p>State of Issuance: N/A</p> <p>State Identification Number (SID): N/A</p>	<p>Alternative Reference: SSN ____</p> <p>Alternative Reference: FAN ____</p> <p>Alternative Reference: DLN ____</p> <p>Alternative Reference: SID ____</p>



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 *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts*. 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 may, upon motion or its own initiative, with or without a hearing, order the filed document sealed, redacted, amended or any combination thereof. A court may impose sanctions, including costs necessary to prepare a compliant document for filing in accordance with applicable authority.



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

Attach additional page(s) if necessary.



Abuse Victim Addendum
Additional page (if necessary)

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

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



BRADFORD COUNTY

COURT OF COMMON PLEAS

DIVORCE/CUSTODY COVER SHEET

This form must be filled out if you are filing a divorce or custody action in the Prothonotary's Office and must be given to Court Administration. PLEASE PRINT LEGIBLY.

DO NOT FILE IN THE PROTHONOTARY'S OFFICE

_____	DOB _____	:	Date Filed: _____
_____	DOB _____	:	
_____	DOB _____	:	Docket No. _____
	Plaintiffs	:	
vs.		:	
_____	DOB _____	:	
_____	DOB _____	:	
_____	DOB _____	:	
	Defendants		

PLEASE CHECK ONE:

DIVORCE FILING – NO CHILDREN	<input type="checkbox"/>
DIVORCE FILING – CHILDREN UNDER 18/BUT NO CUSTODY COUNT	<input type="checkbox"/>
DIVORCE FILING – CUSTODY COUNT	<input type="checkbox"/>
CUSTODY COMPLAINT/MODIFICATION	<input type="checkbox"/>

FILED BY: _____

<p>IMPORTANT: This form is not to be filed in the Prothonotary's Office, but should be taken directly to Court Administration for statistical and case management purposes immediately upon the filing of a new case or new petition/complaint (custody or divorce) in a family court case (It is not needed when filing petitions for special relief).</p>
--

VS. : IN THE COURT OF COMMON PLEAS
: :
: BRADFORD COUNTY, PENNSYLVANIA

: NO.

.....

ORDER OF COURT

You, _____, have been sued in court to (OBTAIN)(MODIFY)
(shared legal custody)/(sole legal custody)/(partial physical custody)/(primary physical custody)/(shared
physical custody)/(sole physical custody)/(supervised physical custody) of the
child(ren) [please list children using initials only] : _____

_____.

You are ordered to appear in person at the Bradford County Courthouse, Towanda Pennsylvania
on _____, 20____, at _____.M. in _____, for a
preliminary custody conference.

If you fail to appear as provided by this order, an order for custody may be entered against you or
the court may issue a warrant for your arrest.

You must file with the court a verification regarding any criminal record or abuse history regarding
you or anyone living in your household on or before the initial in-person contact with the court
(Including, but not limited to, a conference with the conference officer or judge) but not later than 30 days
after service of the complaint or petition.

No party may make a change in the residence of any child which significantly impairs the ability of
the other party to exercise custodial rights without first complying with all of the applicable provisions of
23 Pa.C.S. §5337 and Pa.R.C.P. No. 1915.17 regarding relocation.

You are further ordered to attend the Education Program for Separated Parents:

- The parties are directed to pre-register with the Court Administrator and attend the Education Program for Separated Parents on one of the two dates listed below:

Saturday, _____, 8:30 a.m. to 12:30 p.m.

Saturday, _____, 8:30 a.m. to 12:30 p.m.

The parties may also complete the program online, such as www.FamilyAffairs.org and are required to print the Certificate of Completion and provide it to Bradford County Court Administration.

- The parties have previously attended the Education for Separated Parents as evidenced by certificates of attendance (attached hereto) (contained in the official court file case number _____.)

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER.

IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

**Bradford County Prothonotary
Bradford County Courthouse
301 Main Street
Towanda, Pennsylvania 18848
(570) 265-1705**

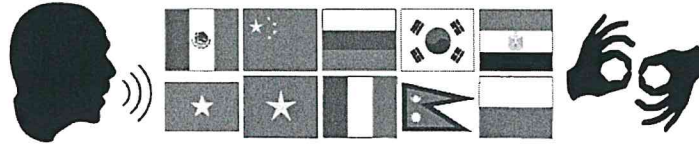
AMERICANS WITH DISABILITIES ACT OF 1990

The Court Of Common Pleas of Bradford County is required by law to comply with the Americans with Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the court, please contact our office. All arrangements must be made at least 72 hours prior to any hearing or business before the court.

BY THE COURT:

Date: _____ P.J.

Notice of Language Rights



Language Access Coordinator

Bradford County Courthouse, 301 Main Street, Towanda, PA, 18848

570-265-1707

languageaccesscoordinator@bradfordco.org

English: You have the right to an interpreter at no cost to you. To request an interpreter, please inform court staff using the contact information provided at the top of this notice.

Spanish/Español: Usted tiene derecho a un intérprete libre de costo. Para solicitar un intérprete favor de informárselo al personal judicial utilizando la información provista en la parte superior de este aviso.

Mandarin/Cantonese Simplified Chinese/普通话/粤语简体中文: 您有权获得免费的口译员服务。若需要口译员，请使用本通知上方提供的联系信息通知法院工作人员。

Korean/한국어: 귀하는 비용에 대한 부담 없이 통역 서비스를 받을 권리가 있습니다. 통역 서비스를 요청하려면 본 통지서의 상단에 기재된 연락처를 통해 법원 직원에게 알려주세요.

Polish/Polski: Ma Pan/Pani prawo do nieodpłatnego skorzystania z usług tłumacza ustnego. Aby zwrócić się o wsparcie ze strony tłumacza ustnego, proszę skontaktować się z pracownikami sądu, korzystając z danych znajdujących się w górnej części niniejszego dokumentu.

: IN THE COURT OF COMMON PLEAS
: BRADFORD COUNTY,
: PENNSYLVANIA

_____,
Plaintiff

vs.

NO. _____

_____,
Defendant.

COMPLAINT FOR CUSTODY

1. The Plaintiff is _____, residing at _____;

telephone number - _____.

2. The Defendant is _____, residing at _____;

telephone number - _____.

3. The relationship of Plaintiff to the child(ren) is that of _____.

4. The relationship of Defendant to the child(ren) is that of _____.

5. Plaintiff seeks (shared legal custody)/(sole legal custody)/(partial physical custody)/
(primary physical custody)/(shared physical custody)/(sole physical custody)/(supervised physical
custody) of the following child(ren) [please refer to children using initials only]:

NAME:

PRESENT RESIDENCE:

YEAR OF BIRTH:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. The child(ren) (was/were) (wasn't/weren't) born out of wedlock.

7. The child(ren) (is/are) presently in the custody of _____
who resides at _____.

8. During the past five years, the child(ren) has/have resided with the following persons at the following addresses:

(List All Persons)	(List All Addresses)	(Dates)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. The mother of the child(ren) is _____,
currently residing at _____.

10. She is (married)/(divorced)/(single).

11. The father of the child(ren) is _____,
currently residing at _____.

12. He is (married)/(divorced)/(single).

13. The Plaintiff currently resides with the following persons:

Name:	Relationship:
_____	_____
_____	_____
_____	_____

14. The Defendant currently resides with the following persons:

Name:

Relationship:

_____	_____
_____	_____
_____	_____

15. Plaintiff (has) (has not) participated as a party of witness, or in another capacity, in other litigation concerning the custody of the child(ren) in this or another court. The Court, term and number, and its relationship to this action is:

_____.

16. Plaintiff (has) (has no) information of a custody proceeding concerning the child(ren) pending in a court of this Commonwealth. The Court, term and number, and its relationship to this action is: _____.

17. Plaintiff (knows) (does not know) of a person not a party to the proceedings who has physical custody of the child(ren) or claims to have custodial rights with respect to the child(ren).

The name and address of such person(s) is/are:

Name:

Address:

_____	_____
_____	_____

18. Plaintiff has been advised of the requirement to attend the seminar titled Education Program for Separated Parents.

The parties have previously attended the Education Program for Separated Parents as evidenced by certificates of attendance (attached hereto) (contained in the

official court file case number _____).

19. The best interest and permanent welfare of the child(ren) will be served by granting the relief requested because: (set forth facts showing that the granting of the requested relief will be in the best interest and permanent welfare of the child(ren) below):

20. Each parent whose parental rights to the child(ren) have not been terminated and the person who has physical custody of the child(ren) have been named as parties to this action. All other persons, named below, who are known to have or claim to have a right to custody of the child(ren) will be given notice of the pendency of this action and the right to intervene:

Name:	Address:	Basis of Claim:
-------	----------	-----------------

_____	_____	_____
_____	_____	_____
_____	_____	_____

21. (a.) If the plaintiff is a grandparent who is not in loco parentis to the child and is seeking physical and/or legal custody pursuant to 23 Pa.C.S. §5323, you must plead facts establishing standing pursuant to 23 Pa.C.S. §5324(3).

(b.) If the plaintiff is a grandparent or great-grandparent who is seeking partial physical custody or supervised physical custody pursuant to 23 Pa.C.S. §5325, you must plead facts establishing standing pursuant to §5325.

(c.) If the plaintiff is a person seeking physical and/or legal custody pursuant to 23 Pa.C.S §5324(2) as a person who stands in loco parentis to the child, you must plead facts establishing standing.

22. I have attached the Criminal Record/Abuse History Verification form required pursuant to Pa.R.C.P. No. 1915.3-1.

21. Wherefore, Plaintiff requests the Court to grant (shared legal custody)/(sole legal custody)/(partial physical custody)/ (primary physical custody)/(shared physical custody)/(sole physical custody)/(supervised physical custody).

Signature

		: IN THE COURT OF COMMON PLEAS
	Plaintiff	:
vs.		: BRADFORD COUNTY,
		: PENNSYLVANIA
		:
		:
		: NO. _____
		:
	Defendant.	:
		:

VERIFICATION

I verify that the statements made in this Complaint 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: _____

Signature of Plaintiff

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 OR ANNUITIES: \$ _____

SOCIAL SECURITY BENEFITS: \$ _____

SUPPORT PAYMENTS: \$ _____

DISABILITY PAYMENTS: \$ _____

UNEMPLOYMENT COMPENSATION: \$ _____

WORKER=S COMPENSATION: \$ _____

PUBLIC ASSISTANCE: \$ _____

OTHER: \$ _____

d. OTHER CONTRIBUTIONS TO HOUSEHOLD SUPPORT:

HUSBAND/WIFE - NAME: _____

If your husband/wife 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 (HOME OR LAND):

VALUE: \$ _____

HOW MUCH IS OWED: \$ _____

WHERE LOCATED: _____

TAXES (PER YEAR): \$ _____

MOTOR VEHICLE:

MAKE: _____ YEAR: _____

COST: \$ _____

AMOUNT OWED: \$ _____

STOCKS/BONDS: \$ _____

OTHER: \$ _____

Describe: _____

f. DEBTS AND OBLIGATIONS PER MONTH:

MORTGAGE/RENT: \$ _____

UTILITIES:

ELECTRIC: \$ _____

WATER/SEWER: \$ _____

OIL/GAS/COAL: \$ _____

PHONE: \$ _____

TV/CABLE: \$ _____

GARBAGE: \$ _____

OTHER: \$ _____

LOANS: \$ _____

CREDIT CARDS: \$ _____

FOOD: \$ _____

NON-FOOD: \$ _____

CLOTHING: \$ _____

CHILD SUPPORT: \$ _____

CHILD CARE: \$ _____

TRANSPORTATION COSTS: \$ _____

CAR PAYMENT: \$ _____

REPAIR COSTS: \$ _____

MEDICAL BILLS: \$ _____

PRESCRIPTIONS: \$ _____

BACK TAXES: \$ _____

(Personal, Real Estate)

MISCELLANEOUS HOUSEHOLD EXPENSES: \$ _____

Describe: _____

g. PERSONS DEPENDANT UPON YOU FOR SUPPORT:

CHILDREN, IF ANY:

INITIALS: _____ YEAR OF BIRTH: _____

INITIALS: _____ YEAR OF BIRTH: _____

INITIALS: _____ YEAR OF BIRTH: _____

INITIALS: _____ YEAR OF BIRTH: _____

INITIALS: _____ YEAR OF BIRTH: _____

OTHER PERSONS:

NAME: _____

RELATIONSHIP: _____

NAME: _____

RELATIONSHIP: _____

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.

I verify that the statements made in this affidavit are true and correct. I understand that false statements herein are made subject to penalties of 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

DATE

SIGNATURE

	:	IN THE COURT OF COMMON PLEAS
	:	BRADFORD COUNTY,
Plaintiff	:	PENNSYLVANIA
	:	
vs.	:	NO. _____
	:	
	:	
Defendant.	:	

ORDER

NOW, this _____ day of _____, _____,

upon consideration of the foregoing Petition and Affidavit, **IT IS ORDERED AND DIRECTED** that _____ be permitted to proceed in this action In Forma Pauperis pursuant to Pa. R.C.P. 240(f).

BY THE COURT:

_____**J.**

PLAINTIFF

vs.

IN THE COURT OF COMMON PLEAS

COUNTY, PENNSYLVANIA

NO. _____

DEFENDANT

ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY

1. I am the Plaintiff Defendant in the above-captioned case.
2. I intend to represent myself in the custody, divorce, support, protection from abuse, paternity case.
3.

Check only one box in Question 3

This is a new case and I am representing myself. I have decided not to hire an attorney to represent me.
OR

This is not a new case and I am representing myself. I have decided not to hire an attorney to represent me.
OR

This is not a new case. _____ previously
(Name of Attorney)
represented me in this case. I have decided not to be represented by that attorney and direct the Prothonotary to remove that attorney as my counsel of record in this case.
I have provided a copy of this form to that attorney listed above at the following address:

That attorney has acknowledged his/her withdrawal from this case by signing this form.
_____, Esq.
(Attorney signature)
4. I am entering my appearance as a self-represented party _____
(Your Signature)
5. I understand that I need to provide a street address or P.O. Box for the purpose of receiving all future pleadings and other legal notices. I further understand that this does not need to be my home address. My address for the purpose of receiving all future pleadings and other legal notices is:

- I understand that this address will be the only address to which notices and pleadings in this case will be sent and that I am responsible to check the mail at this address so I do not miss important deadlines or proceedings.**

I am not providing my address because I reside at a confidential location protected by the Protection From Abuse Act, 23 Pa. C.S. § 6112 and/or the Address Confidentiality Program, 23 Pa. C.S. § 6701-6713, and/or the Child Custody Act, 23 Pa. C.S. § 5336(b).
6. My telephone number where I can be reached is _____
 I am not providing my telephone number because it is confidential pursuant to the Protection From Abuse Act, 23 Pa. C.S. § 6112 and/or the Child Custody Act, 23 Pa. C.S. § 5336(c).
7. **I UNDERSTAND I MUST FILE A NEW FORM EVERY TIME MY ADDRESS OR TELEPHONE NUMBER CHANGES.**
8. I understand that I must ensure that a copy of this form is served on all other attorneys or other self-represented parties at the following addresses as listed below: (Use reverse side if you need more space)

Name _____ Address _____

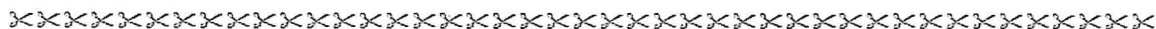
Name _____ Address _____
9. I verify that the statements made in this Entry of Appearance as a Self-Represented Party are true and correct. I understand that if I make false statements herein, that I am subject to the criminal penalties of 18 Pa. C.S. § 4904 relating to unsworn falsification to authorities that could result in a fine and/or prison term.

Date

(Your Signature)

BRADFORD COUNTY COURTS
EDUCATION PROGRAM
FOR
SEPARATED PARENTS

"EPSP"	All parents with children under 18 who seek a divorce and all named parties in custody actions are required to attend a class on the importance of cooperative parenting. In addition, the court may require parties in other domestic actions attend. Both parents may attend the same class; however they are not required to do so. Failure to comply with an order to attend EPSP may result in a finding of contempt, and sanctions imposed by the Court.
WHERE	The 3 ½ hour program is held at the Bradford County Courthouse, Towanda, PA.
WHEN	One Saturday morning each month, usually the third Saturday. The program begins at 8:30 a.m.
FEES	The cost of the program is \$35.00 for each participant. Individuals who do not have family court cases are also welcome to attend, with prior registration. The fee may be waived or reduced by Court Administration in consultation with the Court.
REGISTER	The registration form below must be completed and sent to Court Administration, Bradford County Courthouse, 301 Main Street, Towanda, PA 18848, with CHECK OR MONEY ORDER (no cash accepted). Registration for each program closes at Noon on the Friday immediately preceding the Saturday program. YOU CANNOT REGISTER BY PHONE.
CHECK-IN	Please be prompt. The doors will be locked as soon as the class starts. Latecomers and unregistered individuals will not be allowed in and will need to contact Court Administration at 570-265-1707 on the next business day. CHILD CARE IS NOT PROVIDED.
SAFETY	There will always be a deputy sheriff present at each program to assure your safety. If you have concerns, please inform the deputy.



REGISTRATION FORM
EDUCATION PROGRAM FOR
SEPARATED PARENTS

Name: _____ **Case No.** _____

Address: _____

Date of Birth: _____

Home Phone: _____

Mobile Phone: _____

Program date you wish to attend: _____
 (Choose date from the Court Order directing you to attend the program.)

Include check or money order for \$35.00 – send to Court Administration, Bradford County Courthouse, 301 Main Street, Towanda, PA 18848.

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

<i>Plaintiff</i>	:	
v.	:	
<i>Defendant</i>	:	NO: ____ FC ____
	:	CIVIL ACTION - CUSTODY
	:	

CRIMINAL RECORD/ABUSE HISTORY VERIFICATION FORM

I, _____, do hereby swear or affirm, subject to penalties of law, including 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities) as follows:

1. Unless indicated by my checking the box next to a crime below, neither I nor any other member of my household have been convicted, or pled guilty, or pled no contest, or was adjudicated delinquent where the record is publicly available pursuant to the Juvenile Act, 42 Pa.C.S. § 6307, to any of the following crimes in Pennsylvania, or to any substantially equivalent crime in any other jurisdiction (including any pending charges):

FOR EACH LISTED OFFENSE, CHECK ALL BOXES THAT APPLY:

<p><u>18 Pa.C.S. Ch. 25 (relating to criminal homicide):</u></p> <p><input type="checkbox"/> Does not apply to either me or any household member</p> <p><input type="checkbox"/> Applies to me as follows: By <input type="checkbox"/> Conviction <input type="checkbox"/> Guilty or No Contest Plea <input type="checkbox"/> Adjudicated Delinquent <input type="checkbox"/> Charges pending Date: (___ / ___ / ___) Sentence: _____</p> <p><input type="checkbox"/> Applies to another household member as follows: Name: _____ By <input type="checkbox"/> Conviction <input type="checkbox"/> Guilty or No Contest Plea <input type="checkbox"/> Adjudicated Delinquent <input type="checkbox"/> Charges pending Date: (___ / ___ / ___) Sentence: _____</p>

<p><u>18 Pa.C.S. §2702 (relating to aggravated assault):</u></p> <p><input type="checkbox"/> Does not apply to either me or any household member</p> <p><input type="checkbox"/> Applies to me as follows: By <input type="checkbox"/> Conviction <input type="checkbox"/> Guilty or No Contest Plea <input type="checkbox"/> Adjudicated Delinquent <input type="checkbox"/> Charges pending Date: (___ / ___ / ___) Sentence: _____</p> <p><input type="checkbox"/> Applies to another household member as follows: Name: _____ By <input type="checkbox"/> Conviction <input type="checkbox"/> Guilty or No Contest Plea <input type="checkbox"/> Adjudicated Delinquent <input type="checkbox"/> Charges pending Date: (___ / ___ / ___) Sentence: _____</p>

<p><u>18 Pa.C.S. §2706 (relating to terroristic threats):</u></p> <p><input type="checkbox"/> Does not apply to either me or any household member</p> <p><input type="checkbox"/> Applies to me as follows: By <input type="checkbox"/> Conviction <input type="checkbox"/> Guilty or No Contest Plea <input type="checkbox"/> Adjudicated Delinquent <input type="checkbox"/> Charges pending Date: (___ / ___ / ___) Sentence: _____</p> <p><input type="checkbox"/> Applies to another household member as follows: Name: _____ By <input type="checkbox"/> Conviction <input type="checkbox"/> Guilty or No Contest Plea <input type="checkbox"/> Adjudicated Delinquent <input type="checkbox"/> Charges pending Date: (___ / ___ / ___) Sentence: _____</p>
--

18 Pa.C.S. §2709.1 (relating to stalking):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2901 (relating to kidnapping):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2902 (relating to unlawful restraint):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2903 (relating to false imprisonment):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3121 (relating to rape):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3122.1 (relating to statutory sexual assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3123 (relating to involuntary deviate sexual assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3124.1 (relating to sexual assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3125 (relating to aggravated indecent assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3126 (relating to indecent assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3127 (relating to indecent exposure):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3129 (relating to sexual intercourse with animal):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3130 (relating to conduct relating to sex offenders):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3301 (relating to arson and related offenses):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4302 (relating to incest):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4303 (relating to concealing death of child):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4304 (relating to endangering welfare of children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4305 (relating to dealing in infant children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §5902(b) (relating to prostitution and related offenses):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §6301 (relating to corruption of minors):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §6312 (relating to sexual abuse of children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §6318 (relating to unlawful contact with minor):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §6320 (relating to sexual exploitation of children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §6114 (relating to contempt for violation of protection order or agreement):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

Driving under the influence of drugs or alcohol:

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device:

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

2. Unless indicated by my checking the box next to an item below, neither I nor any other member of my household have a history of violent or abusive conduct including the following:

(1) A finding of abuse by a Children & Youth Agency or similar agency in Pennsylvania or under a similar statute in another jurisdiction, or (2) a history of abusive conduct as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction, or (3) any other history of violent or abusive conduct:

- Does not apply to either me or any household member
- Applies to me as follows:
 By a finding of abuse made against me by a Children & Youth Agency or similar agency in Pennsylvania or under a similar statute in another jurisdiction
 By a history of abusive conduct by me as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction
 Other: _____
Date: (___ / ___ / ___)
- Applies to another household member as follows: Name: _____
 A finding of abuse made against this household member by a Children & Youth Agency or similar agency in Pennsylvania or under a similar statute in another jurisdiction
 A history of abusive conduct by this household member as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction
 Other: _____
Date: (___ / ___ / ___)

3. If any of the preceding crimes or findings of abuse apply to you or a household member, list any evaluations, counseling or other treatment received following the conviction or finding of abuse:

4. If any of the preceding crimes or findings of abuse apply to a household member, state that person's name, date of birth and relationship to the child(ren):

Name: _____ Date of Birth: (___ / ___ / ___)

Relationship to the child(ren): _____

5. If you are aware that the other party or members of the other party's household has or have a criminal/abuse history, please explain:

I verify that the statements made in this NOTICE AND ORDER 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: _____

Signature

NOTICE: A CRIMINAL OR ABUSE HISTORY VERIFICATION FORM MUST BE FILED ALONG WITH EVERY NEW CUSTODY COMPLAINT OR CUSTODY PETITION, EVEN IF YOU HAVE ALREADY FILED ONE BEFORE. A COPY OF YOUR COMPLETED CRIMINAL OR ABUSE HISTORY VERIFICATION FORM MUST ALSO BE SERVED (PROVIDED TO) THE OTHER PARTY AT THE SAME TIME AS THE COMPLAINT OF PETITION.

IN THE COURT OF COMMON PLEAS
OF BRADFORD COUNTY, PENNSYLVANIA

Plaintiff

v. _____
Defendant

NO: ____ FC ____
CIVIL ACTION - CUSTODY

CRIMINAL RECORD/ABUSE HISTORY VERIFICATION FORM

I, _____, do hereby swear or affirm, subject to penalties of law, including 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities) as follows:

6. Unless indicated by my checking the box next to a crime below, neither I nor any other member of my household have been convicted, or pled guilty, or pled no contest, or was adjudicated delinquent where the record is publicly available pursuant to the Juvenile Act, 42 Pa.C.S. § 6307, to any of the following crimes in Pennsylvania, or to any substantially equivalent crime in any other jurisdiction (including any pending charges):

FOR EACH LISTED OFFENSE, CHECK ALL BOXES THAT APPLY:

18 Pa.C.S. Ch. 25 (relating to criminal homicide):

Does not apply to either me or any household member

Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2702 (relating to aggravated assault):

Does not apply to either me or any household member

Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2706 (relating to terroristic threats):

Does not apply to either me or any household member

Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2709.1 (relating to stalking):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2901 (relating to kidnapping):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2902 (relating to unlawful restraint):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2903 (relating to false imprisonment):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3121 (relating to rape):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3122.1 (relating to statutory sexual assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3123 (relating to involuntary deviate sexual assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3124.1 (relating to sexual assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3125 (relating to aggravated indecent assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3126 (relating to indecent assault):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3127 (relating to indecent exposure):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3129 (relating to sexual intercourse with animal):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3130 (relating to conduct relating to sex offenders):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §3301 (relating to arson and related offenses):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4302 (relating to incest):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4303 (relating to concealing death of child):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4304 (relating to endangering welfare of children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §4305 (relating to dealing in infant children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §5902(b) (relating to prostitution and related offenses):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____

18 Pa.C.S. §6301 (relating to corruption of minors):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____

18 Pa.C.S. §6312 (relating to sexual abuse of children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____

18 Pa.C.S. §6318 (relating to unlawful contact with minor):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____

18 Pa.C.S. §6320 (relating to sexual exploitation of children):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (/ /) Sentence: _____

18 Pa.C.S. §6114 (relating to contempt for violation of protection order or agreement):

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

Driving under the influence of drugs or alcohol:

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device:

- Does not apply to either me or any household member
- Applies to me as follows:
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____
- Applies to another household member as follows: Name: _____
By Conviction Guilty or No Contest Plea Adjudicated Delinquent Charges pending
Date: (___ / ___ / ___) Sentence: _____

7. Unless indicated by my checking the box next to an item below, neither I nor any other member of my household have a history of violent or abusive conduct including the following:

(1) A finding of abuse by a Children & Youth Agency or similar agency in Pennsylvania or under a similar statute in another jurisdiction, or (2) a history of abusive conduct as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction, or (3) any other history of violent or abusive conduct:

- Does not apply to either me or any household member
- Applies to me as follows:
 By a finding of abuse made against me by a Children & Youth Agency or similar agency in Pennsylvania or under a similar statute in another jurisdiction
 By a history of abusive conduct by me as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction
 Other: _____
Date: (___ / ___ / ___)
- Applies to another household member as follows: Name: _____
 A finding of abuse made against this household member by a Children & Youth Agency or similar agency in Pennsylvania or under a similar statute in another jurisdiction
 A history of abusive conduct by this household member as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction
 Other: _____
Date: (___ / ___ / ___)

8. If any of the preceding crimes or findings of abuse apply to you or a household member, list any evaluations, counseling or other treatment received following the conviction or finding of abuse:

9. If any of the preceding crimes or findings of abuse apply to a household member, state that person's name, date of birth and relationship to the child(ren):

Name: _____ Date of Birth: (___ / ___ / ___)

Relationship to the child(ren): _____

10. If you are aware that the other party or members of the other party's household has or have a criminal/abuse history, please explain:

I verify that the statements made in this NOTICE AND ORDER 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: _____

Signature

NOTICE: A CRIMINAL OR ABUSE HISTORY VERIFICATION FORM MUST BE FILED ALONG WITH EVERY NEW CUSTODY COMPLAINT OR CUSTODY PETITION, EVEN IF YOU HAVE ALREADY FILED ONE BEFORE. A COPY OF YOUR COMPLETED CRIMINAL OR ABUSE HISTORY VERIFICATION FORM MUST ALSO BE SERVED (PROVIDED TO) THE OTHER PARTY AT THE SAME TIME AS THE COMPLAINT OF PETITION.