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

:

VS.	: NO.		
	:		
	:::::::::::::::::::::::::::::::::::::::		
	ORDER		
AND NOW,	, 20, upon Hardship Application of		
	, a Rule is issued upon Jonathan Foster, solicitor for the Bradfo	ord	
County Commissioners, to show	cause why the relief should not be granted.		
RULE RETURNABLE, f	for answer or objection to be filed by theday of		
	, 20, in courtroom no of the Bradford County Courtho	ouse,	
Towanda, Pa.			
The petitioner herein mus	t serve a copy of the attached application and completed rule order	upon	
Mr. Foster, at 2268 Elmira Street	, Sayre, PA 18840.		
	BY THE COURT:		
	J.		
	Maureen T. Beirne		
mlv	Notice of Language Rights		

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/普通话粤语简本中文 您有核疾导统势的口译员服务。若需要口译员 请史用纯通知上方提供的联系言息通知法完工作人员。

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

**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.

## HARDSHIP APPLICATION REQUEST FOR BRADFORD COUNTY TO ADVANCE EVALUATION FEES

		Amount Requested: \$					
	that I be all following:	, hereby request that Bradford County advance my custody evaluation owed to make alternate arrangements for payment of said fee. In support of this we/I					
		ncial condition am unable to pay custody evaluation potion matter.					
I	I am the real owner of real estate located at						
I -	presently re	eside at					
	ental is rece	not)receiving any rental payments for usage of the real estate listed above (if ived, please explain.)					
e I	evaluation fe	nat the information below relating to my ability to pay the custody evaluation fees, is					
	(a)	Name:Address:					
	(b)	Phone No  Employment					
	(0)	My present employer is: Employer: Address:					
		Gross Salary Wages per month:  Type of work:  or I am presently unemployed.  The date of my last employment was:					
		Gross salary or wages per month:  Type of work:					
	(c)	Other income or benefits that I have received within the past twelve months:					

	Business or profession:				
	Other self-employment:				
	Interest:				
	Dividends:				
	Pensions 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:				
(4)	(Wife) (Husband) is employed				
	Gross 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 #1: Make: Year:				
	Cost: Amount owed \$				
	Motor vehicle #2: Make: Year:				
	Cost: Amount owed \$				
	Stocks, bonds:				
	Boat: Make: Year:				
	Cost: Amount owed \$				
	Tractor or Riding Lawn Mower: Make: Year:				
	Cost: Amount owed \$				
	Snowmobile: Make: Yundun owed \$\frac{1}{2} \]				
	Cost: Amount owed \$				
	ATV: Make: Year:				
	Cost: Amount owed \$				
	Motorcycle: Make: Year:				
	Cost: Amount owed \$				
	Personal Computer: Make: Year:				
	Cost: Amount owed \$				
	Guns:				
	Other:				
(f)	Debts and Obligations				
	Mortgage:				
	Rent:				
	Loans				

		Credit Cards/Current	t Balances:			
		Utility Bills: Gas	, Water			
			, Cable TV _			
	(g)	Persons dependent u (Wife) (Husb				
		Children, if any:	,			
		Name:		Age:		
				-		
		Other persons:				
		<u> </u>			_	
		Relationship:			_	
	(h)	Amount of Attorney Fees paid for my representation in the divorce and/or custody				
		Amount of Attorney	Fees owed:		_•	
	I propose the	e following payment pla	an.			
	improvemen	t in my financial circun	g obligation to inform E nstances which would p the amount of my mon	ermit us/me to		
	statements he		this petition are true and to the penalties of 18 Pa			
Date:					<del></del>	
				, Petitio	oner	