

00-144-CD
WAYNE PUSEY -vs- WILBERT PUSEY

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA

106 Wayne Pusey,
Plaintiff

Vs

106 Wilbert Pusey,
Defendant

No. 00-144-00

Type of Case: Civil

Type of Pleading: Petition to
Proceed In Forma Pauperis

Filed on behalf of: Defendant

Counsel of record:
Robin Jean Foor
Pa ID No. 41520
KEYSTONE LEGAL SERVICES, INC.
PO Box 950
Clearfield, PA 16830
(814)765-9646

FILED

FEB 02 2000

William A. Shaw
Prothonotary

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL ACTION--LAW

Wayne Pusey,	: No.
Plaintiff	:
	:
v.	:
	:
Wilbert Pusey,	:
Defendant	:

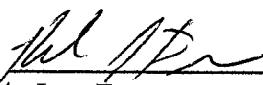
PRAECIPE TO PROCEED IN FORMA PAUPERIS

TO THE PROTHONOTARY:

Kindly allow, defendant, Wilbert Pusey, to proceed in forma pauperis.

I, Robin Jean Foor, attorney for the party proceeding in forma pauperis, certify that I believe the party is unable to pay the costs and that I am providing free legal service to the party. The party's affidavit showing inability to pay the costs of litigation is attached hereto.

KEYSTONE LEGAL SERVICES, INC.

By: 

Robin Jean Foor
Attorney for Plaintiff
PO Box 950
Clearfield, PA 16830
(814) 765-2836

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL ACTION--LAW

Wayne Pusey,
Plaintiff

v.

Wilbert Pusey,
Defendant

:
:
:
:
:
:
:
:

PETITION TO PROCEED IN FORMA PAUPERIS

TO THE HONORABLE, THE JUDGES OF THE SAID COURT:

The Petition of Wilbert Pusey respectfully represents:

1. I am the 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: Wilbert Pusey

Address: PO Box 91, Glen Hope, PA 16545

Soc. Sec. No.: 190-32-0150

(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 months

Business or profession: None

Other self-employment: None

Interest: None

Dividends: None

Pension and annuities: None

Social security benefits: None

Support payments: None

Disability payments: None

Unemployment compensation and supplemental benefits: None

Workman's compensation: None

Public assistance: None

Other: SSI 537.40

Foodstamps: \$45.00

(d) Other contributions to household support

Spouse's Name:

If your spouse is employed, state

Employer:

Salary or wages per month:

Type of work:

Contributions from children: None

Contributions from parents: None

Other contributions: None

(e) Property owned

Cash: 3.00

Checking account: 3.50

Savings account: None

Certificates of deposit: None

Real estate (including home): None

Motor vehicle: Model, Make/Year: 1991 Dodge Monaco LE

Cost: 1200 ; Amount owed: 0

Stocks; bonds: None

Other: None

(f) Debts and obligations

Mortgage: None

Rent: None

Loans: County National Bank-\$5601.88, monthly payment \$175; Credit Cards-\$4850
monthly payment \$150; Ernest Green \$2255

Other: Monthly: Utilities: \$125, Car insurance \$12, Property insurance \$14

(g) Persons dependent upon you for support

Spouse's Name: N/A

Children, if any (names/ages): None

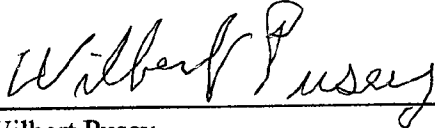
Other persons: Name: None

Relationship: N/A

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: 1-26-00



Wilbert Pusey

CONFIDENTIAL - SECURITY INFORMATION

CONFIDENTIAL - SECURITY INFORMATION

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FILED

FEB 02 2000

William A. Shaw

Prothonotary

For

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL ACTION--LAW

Wayne Pusey,

Plaintiff

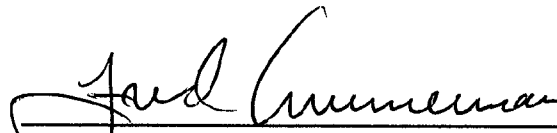
v.

Wilbert Pusey,

Defendant

ORDER

AND NOW, this 4th day of February, 2000, upon consideration of the attached Petition of Wilbert Pusey to Proceed In Forma Pauperis, it is hereby granted that Wilbert Pusey may proceed in forma pauperis. Filing fees are waived.



Judge

FILED

FEB 04 2000

William A. Shaw
Prothonotary

IN THE DISTRICT COURT OF THE UNITED STATES FOR THE DISTRICT OF COLUMBIA

Case No. 00-10000

Filed

(10)

1

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FILED

FEB 04 2000

03/16/00
William A. Shaw
Prothonotary

atty
For

COURT OF COMMON PLEAS

JUDICIAL DISTRICT

FROM

DISTRICT JUSTICE JUDGMENT

COMMON PLEAS No. 00-144-CO

NOTICE OF APPEAL

Notice is given that the appellant has filed in the above Court of Common Pleas an appeal from the judgment rendered by the District Justice on the date and in the case mentioned below.

NAME OF APPELLANT <u>Wilbert Pusey</u>		MAG. DIST. NO. OR NAME OF D.J. <u>46-03-04</u>	
ADDRESS OF APPELLANT <u>Taylor Apts. Box 46.</u>		CITY <u>Mount Union</u>	STATE <u>PA</u>
DATE OF JUDGMENT <u>01-07-00</u>	IN THE CASE OF (Plaintiff) <u>Wayne Pusey</u>	(Defendant) <u>vs. Wilbert Pusey</u>	
CLAIM NO. <u>CV 19 0000129-99</u> <u>LT 19</u>	SIGNATURE OF APPELLANT OR HIS ATTORNEY OR AGENT <u>Rob Foor</u>		

This block will be signed ONLY when this notation is required under Pa. R.C.P.J.P. No. 1008B.

This Notice of Appeal, when received by the District Justice, will operate as a SUPERSEDEAS to the judgment for possession in this case.

Signature of Prothonotary or Deputy

If appellant was CLAIMANT (see Pa. R.C.P.J.P. No. 1001(6) in action before District Justice, he MUST FILE A COMPLAINT within twenty (20) days after filing his NOTICE of APPEAL.

PRAECIPE TO ENTER RULE TO FILE COMPLAINT AND RULE TO FILE

(This section of form to be used ONLY when appellant was DEFENDANT (see Pa. R.C.P.J.P. No. 1001(7) in action before District Justice. IF NOT USED, detach from copy of notice of appeal to be served upon appellee).

PRAECIPE: To Prothonotary

Enter rule upon Wayne Pusey, appellee(s), to file a complaint in this appeal
(Name of appellee(s))

(Common Pleas No. 00-144-CO) within twenty (20) days after service of rule or suffer entry of judgment of non pros.

Rob Foor
Signature of appellant or his attorney or agent

RULE: To Wayne Pusey, appellee(s).
(Name of appellee(s))

(1) You are notified that a rule is hereby entered upon you to file a complaint in this appeal within twenty (20) days after the date of service of this rule upon you by personal service or by certified or registered mail.

(2) If you do not file a complaint within this time, a JUDGMENT OF NON PROS WILL BE ENTERED AGAINST YOU.

(3) The date of service of this rule if service was by mail is the date of mailing.

Date: February 4, 2000

William A. Shaw
Signature of Prothonotary or Deputy

FILED

FEB 04 2000

William A. Shaw
Prothonotary

PROOF OF SERVICE OF NOTICE OF APPEAL AND RULE TO FILE COMPLAINT

(This proof of service MUST BE FILED WITHIN TEN (10) DAYS AFTER filing the notice of appeal. Check applicable boxes) , .

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF _____ ; ss

AFFIDAVIT: I hereby swear or affirm that I served

- ☐ a copy of the Notice of Appeal, Common Pleas No. _____, upon the District Justice designated therein on
(date of service) _____, ☐ by personal service ☐ by (certified) (registered) mail, sender's
receipt attached hereto, and upon the appellee, (name) _____, on
_____, 19____ ☐ by personal service ☐ by (certified) (registered) mail, sender's receipt attached hereto.
- ☐ and further that I served the Rule to File a Complaint accompanying the above Notice of Appeal upon the appellee(s) to whom
the Rule was addressed on _____, 19____, ☐ by personal service ☐ by (certified) (registered)
mail, sender's receipt attached hereto.

SWORN (AFFIRMED) AND SUBSCRIBED BEFORE ME

THIS _____ DAY OF _____, 19____

Signature of affiant

Signature of official before whom affidavit was made

Title of official

My commission expires on _____, 19____

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: **CLEARFIELD**

Mag. Dist. No.:	46-3-04
DJ Name: Hon.	JAMES L. HAWKINS
Address:	430 SPRING STREET P.O. BOX 362 HOUTZDALE, PA
Telephone: (814)	378-7160 16651-0362

**NOTICE OF JUDGMENT/TRANSCRIPT
CIVIL CASE**

PLAINTIFF: **PUSEY, WAYNE**
NAME and ADDRESS
GLEN HOPE, PA 16645

VS.
DEFENDANT: **PUSEY, WILBERT**
NAME and ADDRESS
GLEN HOPE, PA 16645

**WILBERT PUSEY
GLEN HOPE, PA 16645**

Docket No.: **CV-0000129-99**
Date Filed: **12/08/99**



THIS IS TO NOTIFY YOU THAT:

Judgment:

FOR PLAINTIFF 00-144-00

☒ Judgment was entered for: (Name) PUSEY, WAYNE

☒ Judgment was entered against: (Name) PUSEY, WILBERT

in the amount of \$ 1,400.00 on: (Date of Judgment) 1/07/00

☐ Defendants are jointly and severally liable. (Date & Time) _____

☐ Damages will be assessed on:

☐ This case dismissed without prejudice.

☐ Amount of Judgment Subject to
Attachment/Act 5 of 1996 \$ _____

☐ Levy is stayed for _____ days or ☐ generally stayed.

☐ Objection to levy has been filed and hearing will be held:

Amount of Judgment	\$ <u>1,400.00</u>
Judgment Costs	\$ <u>.00</u>
Interest on Judgment	\$ <u>.00</u>
Attorney Fees	\$ <u>.00</u>
Total	\$ <u>1,400.00</u>
Post Judgment Credits	\$ _____
Post Judgment Costs	\$ _____
Certified Judgment Total	\$ _____

Date:	Place YOU CAN PAY THE JUDGMENT FEE OR RETURN OF THE WEAPONS OR ANY OTHER AGREEMENT YOU MAY REACH BETWEEN YOURSELVES.
Time:	

ANY PARTY HAS THE RIGHT TO APPEAL WITHIN 30 DAYS AFTER THE ENTRY OF JUDGMENT BY FILING A NOTICE OF APPEAL WITH THE PROTHONOTARY/CLERK OF THE COURT OF COMMON PLEAS, CIVIL DIVISION. YOU MUST INCLUDE A COPY OF THIS NOTICE OF JUDGMENT/TRANSCRIPT FORM WITH YOUR NOTICE OF APPEAL.

1-7-00 Date James L. Hawkins, District Justice

I certify that this is a true and correct copy of the record of the proceedings containing the judgment.

_____, Date _____, District Justice

My commission expires first Monday of January,

2006

SEAL

Z 303 210 372

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
James Hawkins, D.J.	
Street & Number	
430 Spring Street P.O. Box 362	
Post Office, State, & ZIP Code	
Holtzdale, PA 14651-0362	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

Stick postage stamps to article to cover First-Class postage, certified mail fee, and charges for any selected optional services (See front).

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached, and present the article at a post office service window or hand it to your rural carrier (*no extra charge*).
2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach, and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make an inquiry.

102595-99-M-0079

Z 303 210 371

US Postal Service

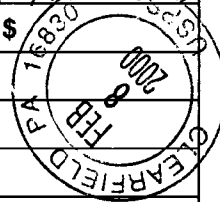
Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
<i>Wayne Pusey</i>	
Street & Number	
Post Office, State, & ZIP Code	
<i>Ham Hope, PA 16645</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995



Stick postage stamps to article to cover First-Class postage, certified mail fee, and charges for any selected optional services (See front).

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6. Save this receipt and present it if you make an inquiry.

102595-99-M-0079

PROOF OF SERVICE OF NOTICE OF APPEAL AND RULE TO FILE COMPLAINT

(This proof of service MUST BE FILED WITHIN TEN (10) DAYS AFTER filing the notice of appeal. Check applicable boxes.)

COMMONWEALTH OF PENNSYLVANIA

COUNTY OF Clearfield

AFFIDAVIT: I hereby swear or affirm that I served

- ☒ a copy of the Notice of Appeal, Common Pleas No. 00-144-CD, upon the District Justice designated therein on
(date of service) February 3, 2000, ☐ by personal service ☒ by (certified) (registered) mail, sender's
receipt attached hereto, and upon the appellee, (name) Wayne Pusey, on
February 8, 2000 ☐ by personal service ☒ by (certified) (registered) mail, sender's receipt attached hereto.
- ☒ and further that I served the Rule to File a Complaint accompanying the above Notice of Appeal upon the appellee(s) to whom
the Rule was addressed on February 8, 2000 ☐ by personal service ☒ by (certified) (registered)
mail, sender's receipt attached hereto.

SWORN (AFFIRMED) AND SUBSCRIBED BEFORE ME

THIS 9th DAY OF February, 2000

Darlene J. Oaks

Signature of official before whom affidavit was made

Notary Public

Title of official

My commission expires on February 5, 2001

Notarial Seal

Darlene J. Oaks, Notary Public
Clearfield Boro, Clearfield County
My Commission Expires Feb. 5, 2001

Member Pennsylvania Association of Notaries

[Signature]

Signature of affiant

COURT OF COMMON PLEAS

FROM

JUDICIAL DISTRICT

DISTRICT JUSTICE JUDGMENT

COMMON PLEAS No.

00-144-00

NOTICE OF APPEAL

Notice is given that the appellant has filed in the above Court of Common Pleas an appeal from the judgment rendered by the District Justice on the date and in the case mentioned below.

NAME OF APPELLANT <u>Willbert Pusey</u>		MAG. DIST. NO. OR NAME OF D.J. <u>46-03-04</u>	
ADDRESS OF APPELLANT <u>Taylor Apts, Box 46, Mount Union, PA 17066</u>		CITY <u>Mount Union</u>	STATE <u>PA</u>
DATE OF JUDGMENT <u>01-07-00</u>	IN THE CASE OF (Plaintiff) <u>Wayne Pusey</u>	(Defendant) <u>Willbert Pusey</u>	
CLAIM NO.	CV 19 <u>0000129-99</u>	SIGNATURE OF APPELLANT OR HIS ATTORNEY OR AGENT <u>Rob Foor</u>	
	LT 19		

This block will be signed ONLY when this notation is required under Pa. R.C.P.J.P. No. 1008B.

This Notice of Appeal, when received by the District Justice, will operate as a SUPERSEDEAS to the judgment for possession in this case.

If appellant was CLAIMANT (see Pa. R.C.P.J.P. No. 1001(6) in action before District Justice, he MUST FILE A COMPLAINT within twenty (20) days after filing his NOTICE of APPEAL.

Signature of Prothonotary or Deputy

PRAECIPE TO ENTER RULE TO FILE COMPLAINT AND RULE TO FILE

(This section of form to be used ONLY when appellant was DEFENDANT (see Pa. R.C.P.J.P. No. 1001(7) in action before District Justice. IF NOT USED, detach from copy of notice of appeal to be served upon appellee).

PRAECIPE: To Prothonotary

Enter rule upon Wayne Pusey, appellee(s), to file a complaint in this appeal

(Common Pleas No. 00-144-00) within twenty (20) days after service of rule or suffer entry of judgment of non pros.

Rob Foor

Signature of appellant or his attorney or agent

RULE: To Wayne Pusey, appellee(s).

Name of appellee(s)

(1) You are notified that a rule is hereby entered upon you to file a complaint in this appeal within twenty (20) days after the date of service of this rule upon you by personal service or by certified or registered mail.

(2) If you do not file a complaint within this time, a JUDGMENT OF NON PROS WILL BE ENTERED AGAINST YOU.

(3) The date of service of this rule if service was by mail is the date of mailing.

Date: February 4, 2000

Will Pusey

Signature of Prothonotary or Deputy

FILED

FEB 09 2000

3:37 pm

William A. Shaw

Prothonotary

COURT FILE

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: **CLEARFIELD**

Mag. Dist. No.: **46-3-04**
DJ Name: Hon. **JAMES L. HAWKINS**
Address: **430 SPRING STREET**
P.O. BOX 362
HOUTZDALE, PA
Telephone: **(814) 378-7160** **16651-0362**

JAMES L. HAWKINS
430 SPRING STREET
P.O. BOX 362
HOUTZDALE, PA 16651-0362

NOTICE OF JUDGMENT/TRANSCRIPT
CIVIL CASE

PLAINTIFF: **PUSEY, WAYNE**
NAME and ADDRESS
GLEN HOPE, PA 16645

VS.
DEFENDANT: **PUSEY, WILBERT**
NAME and ADDRESS
GLEN HOPE, PA 16645

Docket No.: **CV-0000129-99**
Date Filed: **12/08/99**



FILED

THIS IS TO NOTIFY YOU THAT:

Judgment:

FOR PLAINTIFF

☒ Judgment was entered for: (Name) **PUSEY, WAYNE**

FEB 11 2000

☒ Judgment was entered against: (Name) **PUSEY, WILBERT**

William A. Shaw
Prothonotary

in the amount of \$ **1,400.00** on: (Date of Judgment) **1/07/00**

☐ Defendants are jointly and severally liable.

(Date & Time) _____

☐ Damages will be assessed on:

☐ This case dismissed without prejudice.

☐ Amount of Judgment Subject to
Attachment/Act 5 of 1996 \$ _____

☐ Levy is stayed for _____ days or ☐ generally stayed.

☐ Objection to levy has been filed and hearing will be held:

Amount of Judgment	\$ 1,400.00
Judgment Costs	\$.00
Interest on Judgment	\$.00
Attorney Fees	\$.00
Total	\$ 1,400.00

Post Judgment Credits \$ _____
Post Judgment Costs \$ _____

Certified Judgment Total \$ _____

Date:	Place: YOU CAN PAY THE JUDGMENT FEE OR RETURN THE WEAPONS OR ANY OTHER AGREEMENT YOU MAY REACH BETWEEN YOURSELVES.
Time:	

ANY PARTY HAS THE RIGHT TO APPEAL WITHIN 30 DAYS AFTER THE ENTRY OF JUDGMENT BY FILING A NOTICE OF APPEAL WITH THE PROTHONOTARY/CLERK OF THE COURT OF COMMON PLEAS, CIVIL DIVISION. YOU MUST INCLUDE A COPY OF THIS NOTICE OF JUDGMENT/TRANSCRIPT FORM WITH YOUR NOTICE OF APPEAL.

1-7-00 Date **June 1**, District Justice

I certify that this is a true and correct copy of the record of the proceedings containing the judgment.
2-10-00 Date **June 1**, District Justice

My commission expires first Monday of January,

2006

SEAL

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF: **CLEARFIELD**

Mag. Dist. No.:

46-3-04

DJ Name: Hon.

JAMES L. HAWKINS

Address: **430 SPRING STREET**

P.O. BOX 362

HOUTZDALE, PA

Telephone: **(814) 378-7160**

16651-0362

**COMMON PLEAS NOTIFICATION
REQUEST FORM**

PLAINTIFF:

NAME and ADDRESS

PUSEY, WAYNE

GLEN HOPE, PA 16645

VS.

DEFENDANT:

NAME and ADDRESS

PUSEY, WILBERT

GLEN HOPE, PA 16645

JAMES L. HAWKINS
430 SPRING STREET
P.O. BOX 362
HOUTZDALE, PA 16651-0362

Docket No.: **CV-0000129-99**

Date Filed: **12/08/99**



Disposition Date: 1/07/00

Please be advised that an appeal has been filed in the above captioned case. Kindly use this form to indicate the results in this case, and return to the issuing authority (listed above).

RESULT OF APPEAL

Common Pleas Judge

CIVIL-LANDLORD/TENANT APPEAL

___ APPEAL STRICKEN - appeal has been disallowed.

___ APPEAL DISCONTINUED - appeal has been discontinued by appellant.

___ DISTRICT JUSTICE DECISION UPHELD - court has reached the same decision as the district justice judgment.

___ DISTRICT JUSTICE DECISION DISMISSED - court has reached a decision that does not concur with the district justice decision.

WRIT OF CERTIORARI

___ WRIT STRICKEN - appeal has been disallowed.

___ WRIT DISCONTINUED - writ has been discontinued by appellant.

___ DISTRICT JUSTICE DECISION SET ASIDE - the case will be reheard due to irregularity, lack of jurisdiction, or improper venue.

___ WRIT DISMISSED - district justice decision was not found to be flawed, lacking jurisdiction, or having improper venue.

STATEMENT OF OBJECTION (Please give a general summary of the results)

___ OBJECTION DISCONTINUED - objection has been discontinued by the appellant.

___ OBJECTION DENIED - objection has been denied by the Court of Common Pleas.

___ OBJECTION UPHELD - appellant's objection has been upheld by the Court of Common Pleas.

FILED

FEB 11 2000
Ollas/NOCC
William A. Shaw
Prothonotary

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA

Civil Division

Wilbert Pusey,
Plaintiff

vs.

Wayne Pusey,
Defendant

* No. 00-144-CD

*

*

* TYPE OF CASE: Civil

*

*

* TYPE OF PLEADING: Certificate of Service

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*

* FILED ON BEHALF OF: Defendant

*

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* COUNSEL OF RECORD FOR THIS PARTY:

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FILED

FEB 18 2000

William A. Shaw
Prothonotary

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

Wilbert Pusey,
Plaintiff

vs.

Wayne Pusey,
Defendant

*

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* No. 00-144-CD

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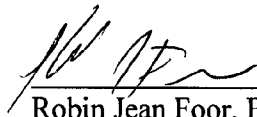
*

CERTIFICATE OF SERVICE

I, Robin Jean Foor, Esquire, hereby certify that on the 8th day of February, 2000, I sent a certified copy of the Notice of Appeal filed to the above-captioned case to the following individual by certified mail, return receipt requested:

Wayne Pusey
Glen Hope, PA 16645

The return receipt card signed by Wayne Pusey is attached.



Robin Jean Foor, Esquire

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA

Civil Division

Wayne Pusey,
Plaintiff

vs.

Wilbert Pusey,
Defendant

* No. 00-144-CD

*

*

* TYPE OF CASE: Civil

*

*

* TYPE OF PLEADING: Certificate of Service

*

*

* FILED ON BEHALF OF: Defendant

*

*

* COUNSEL OF RECORD FOR THIS PARTY:
Robin Jean Foor, Esquire

*

*

* SUPREME COURT NO.: 41520

*

* KEYSTONE LEGAL SERVICES, INC.
211 1/2 East Locust Street
Clearfield, Pennsylvania 16830
(814) 765-9646

*

*

FILED

FEB 18 2000

William A. Shaw
Prothonotary

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

Wayne Pusey,
Plaintiff

vs.

Wilbert Pusey,
Defendant

*
*
*
* No. 00-144-CD
*
*
*
*

CERTIFICATE OF SERVICE

I, Robin Jean Foor, Esquire, hereby certify that on the 8th day of February, 2000, I sent a
certified copy of the Notice of Appel filed to the above-captioned case to the following individual
by certified mail, return receipt requested:

James Hawkins, Distict Justice
430 Spring Street
PO Box 362
Houtzdale, Pennsylvania 16651-0362

The return receipt card signed by James Hawkins is attached.



Robin Jean Foor, Esquire

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

Wayne Pusey,
Plaintiff

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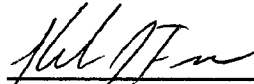
No. 00-144-CD

Wilbert Pusey,
Defendant

PRAECIPE TO NON PROS

To The Prothonotary:

Please enter a judgement of non pros upon the plaintiff. A written notice of intent to file
this praecipe to non pros was mailed to plaintiff on March 8, 2000.



Robin Jean Foor, Esquire
Attorney for Wilbert Pusey
KEYSTONE LEGAL SERVICES, INC.
PO Box 950
Clearfield, PA 16830
(814) 765-9646

FILED

MAR 23 2000

William A. Shaw
Prothonotary

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

Wayne Pusey,
Plaintiff

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No. 00-144-CD

Wilbert Pusey,
Defendant

NOTICE OF PRAECIPE TO ENTER JUDGMENT OF NON PROS

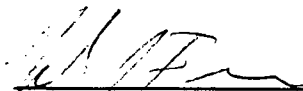
TO: Wayne Pusey

Date of Notice: March 8, 2000

IMPORTANT NOTICE

YOU ARE IN DEFAULT BECAUSE YOU HAVE FAILED TO FILE A COMPLAINT IN THIS CASE. UNLESS YOU ACT WITHIN TEN DAYS FROM THE DATE OF THIS NOTICE, A JUDGMENT MAY BE ENTERED AGAINST YOU WITHOUT A HEARING AND YOU MAY LOSE YOUR RIGHT TO SUE THE DEFENDANT AND THEREBY LOSE PROPERTY OR OTHER IMPORTANT RIGHTS. YOU SHOULD TAKE THIS NOTICE TO A LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE THE FOLLOWING OFFICE TO FIND OUT WHERE YOU CAN GET LEGAL HELP:

Court Administrator
Clearfield County Courthouse
1 North Second Street
Clearfield, PA 16830
(814)765-2641



Robin Jean Foor, Esquire
KEYSTONE LEGAL SERVICES
PO Box 950
Clearfield, PA 16830
(814)765-9646

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:		FEB 11 2000		I also wish to receive the following services (for an extra fee):	
<input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered.				1. <input type="checkbox"/> Addressee's Address 2. <input checked="" type="checkbox"/> Restricted Delivery	
3. Article Addressed to:		4a. Article Number			
Wayne Pucy John Hope, PA 16645		Z 303 210 371			
5. Received By: (Print Name)		4b. Service Type			
Wayne Pucy Sr		<input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise		<input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature		7. Date of Delivery			
Wayne Pucy Sr		2-10-00			
PS Form		8. Addressee's Address (Only if requested and fee is paid)			
		D			

Receipt

Thank you for using Return Receipt Service.

ALWAYS
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

USPS
Permit No. G-10

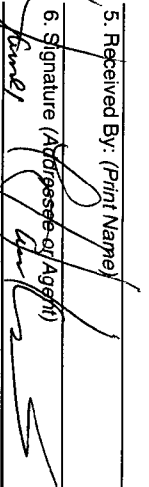
Code in this box

Code in this box

Clearfield, PA 16802

0350+0349

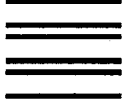
Is your **RETURN ADDRESS** completed on the reverse side?

SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services <input type="checkbox"/> Complete items 3, 4a, and 4b <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery	
3. Article Addressed to: James Hawkins, District Justice 430 Spring Street P.O. Box 342 Hartsville, PA 16101-0342		4a. Article Number Z 303 210 372	
4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD			
5. Received By: (Print Name) James Hawkins		7. Date of Delivery 2-9-00	
6. Signature (Addressee or Agent) 		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

● Print your name, address, and ZIP Code in this box ●

KEYSTONE LEGAL SERVICES INC.
PO Box 950
Clearfield, PA 16830

