

00-872-CD
NORMAN M. JOHNSON vs. JAMES A. DEMCHAK

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

⑬ Norman M. Johnson,

Plaintiff

* No. 00-872-CJ

v.

⑭ James A. Demchak,

Defendant

* TYPE OF CASE:

*

* TYPE OF PLEADING:

*

* FILED ON BEHALF OF:

* JAMES DEMCHAK

* 614 Filber St

* Cawensville PA 16833

236-1181

FILED

JUL 21 2000

William A. Shaw
Prothonotary

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

Norman M Johnson Plaintiff : No. : :

JAMES DEMCHAK Defendant

PETITION TO PROCEED IN FORMA PAUPERIS

TO THE HONORABLE, THE JUDGES OF THE SAID COURT:

The Petition of JAMES DEMCHAK respectfully
represents:

1. I am the (Plaintiff) (Defendant) in the above matter and because of my financial condition am unable to pay the fees and costs of prosecuting or defending the action or proceeding.

2. I am unable to obtain funds from anyone, including my family and associates, to pay the costs of litigation.

3. I represent that the information below relating to my ability to pay the fees and costs is true and correct:

(a) Name: James A. Demchak

Address: 614 Filbert St. Ciriwensville, PA. 16833

Soc. Sec. No.: 203-64-7689

(b) Employment--If you are presently employed, state

Employer: Wal-Mart Distribution Center

Address: 300 Walmart Drive Woodland, PA

Salary or wages per month: \$1600.00

Type of work: *勞工*

--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:

Interest:

Dividends:

Pension and annuities:

Social security benefits:

Support payments:

Disability payments:

Workman's compensation:

Public assistance:

Other:

(d) Other contributions to household support

Spouse's Name:

None

If your spouse is employed, state

Employer:

Salary or wages per month:

Type of work:

Contributions from child(ren):

Contributions from parents:

Other contributions:

(e) Property owned

Cash:

Checking account: NONE

Savings account: \$197.00

Certificates of deposit: NONE

Real estate (including home): 614 Filbert St. Curwensville

Motor vehicle: Make: Olds. ; Year: 1986

Cost: \$500.00 Amount owed: -0

Stocks; bonds: NONE

Other:

(f) Debts and obligations

Mortgage: 698.00

Rent: \$

Loans: \$89.00

Other:

(g) Persons dependent upon you for support

Spouse's Name: Leasa Demchak

Child(ren), if any:

Name(s) and age(s):

Ryan Demchak 15yrs

Kayla Demchak 10yrs

Ashley Demchak 8 yrs.

Molly Demchak 6yrs.

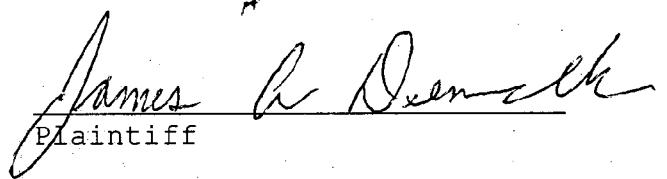
Other persons: Name:

Relationship:

4. I understand that I have a continuing obligation to inform the court of improvement in my financial circumstances which would permit me to pay the costs incurred herein.

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

Date: 7-27-00



Plaintiff

CONSENT FOR RELEASE OF CONFIDENTIAL INFORMATION

I, James A. Denchak, having filed with the Court an Affidavit requesting In Forma Pauperis standing, hereby consent to the release of any information which may be requested by the Judges of the Court of Common Pleas of Clearfield County, or by any employee of the Court Administrator's office acting on the behalf and at the direction of any said Judge, relating to any unemployment compensation, Worker's Compensation, Social Security, Department of Public Welfare or Black Lung benefits which I may receive from any county, state or federal agency which administers or handles processing of any of the above described benefits. This consent shall also authorize the release to the said Court or designee of any information as to any compensation I am receiving, or have received in the past twelve (12) months, from any full or part-time employment of any type whatsoever.

This consent shall remain in effect for a period of twelve (12) months herefrom. A copy or FAX of this release shall have the same legal effect as the original.

Social Security No. 203 - 64 - 7689

Board of Assistance number (Food Stamps, ect): ?

DATE: 07/27/00

James Denchak

FILED
JUL 11 2000
WAS
William A. Shaw
Prothonotary

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

NORMAN M JOHNSON Plaintiff

v.

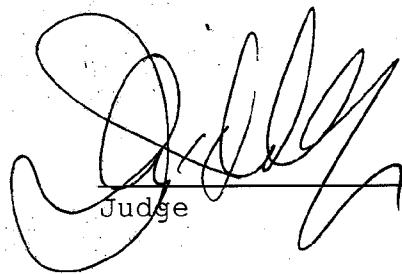
JAMES DEMCHAK Defendant

: No. 00-872-CJ

ORDER

AND NOW, this 1st day of August, 2000, upon
consideration of the Petition of Plaintiff to Proceed In Forma
Pauperis, it is hereby Denied.

ORDERED and DECREED that the Plaintiff may file the
Notice of Appeal
~~complaint~~ in forma pauperis.



Judge

FILED

AUG 01 2000

William A. Shaw
Prothonotary

OFFICE OF PROTHONOTARY AND CLERK OF COURTS

WILLIAM A. SHAW

PROTHONOTARY
AND
CLERK OF COURT

JACQUELINE KENDRICK

DEPUTY PROTHONOTARY

CLEARFIELD COUNTY



DAVID S. AMMERMAN

SOLICITOR

COPY

P.O. Box 549
CLEARFIELD, PENNSYLVANIA 16830
(814) 765-2641 Ext. 1330

August 1, 2000

IN RE: Petition to Proceed In Forma Pauperis

00-872-CD

James A. Demchak
614 Filbert Street
Curwensville, PA 16833

Dear Mr. Demchak, Defendant,

Please be advised that your Petition to Proceed In Forma Pauperis in the above case has been denied by the Court.

You may proceed with this action by filing the enclosed appeal along with the filing fee of \$80.00 with this office. Please submit this letter with your payment and filing.

Sincerely,

A handwritten signature in black ink that reads "William A. Shaw".

William A. Shaw
Prothonotary

Enclosures (1)

WAS/brh