

Clfd Co. Housing Auth. v. Belinda Rauch  
2005-546-CD

05-546-CD

Clfd. Co. Housing Auth. v. Belinda Rauch

CA

In the Court of Common Pleas of Clearfield County, Pennsylvania

Clearfield County  
Housing Authority

Civil Division

222 Leavy Ave

Clearfield, Pa 16830

Rauch, Belinda G Plaintiff

Edgewood apt 3 apt/stc H3

Valley View Drive vs.

Clearfield, Pa 16830

Defendant

2005-546-CD

No. Lt-0000129-05 C.D.

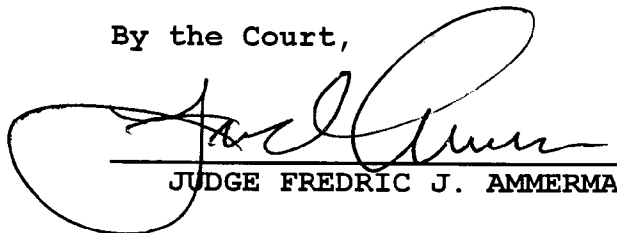
3/31/05

ORDER

NOW, this 19 day of April,  
2005, upon consideration of the foregoing Affidavit in Support  
of Petition to Proceed in Forma Pauperis, it is the ORDER of this  
Court that said Petition is ~~GRANTED~~ / DENIED.

If the Petition is GRANTED, Filing / Mediation Conference  
fee is hereby WAIVED.

By the Court,

  
JUDGE FREDRIC J. AMMERMAN

FILED

12:27/05 to Def.  
APR 19 2005

William A. Shaw  
Prothonotary/Clerk of Courts

In the Court of Common Pleas of Clearfield County, Pennsylvania

Clearfield County Civil Division  
 Housing Authority  
 222 Leary Ave  
 Clearfield, Pa 16830

Rauch, Belinda G Plaintiff  
 Edgewood Apts Apt 103  
 Valley View Drive  
 Clearfield, Pa 16830

Defendant

2005-546-CD

No. 11-0000 129-05 C.D.  
 3/3/05

FILED

AFFIDAVIT IN SUPPORT OF PETITION TO PROCEED IN FORMA PAUPERIS

1. I am the Plaintiff/Defendant in the above matter and because of my financial condition I 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 friends and associates, to pay the costs of litigation.

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

a. Name Belinda G Rauch  
 Address 145 Valley View Drive Apt H-3  
Clearfield, Pa 16830  
 Social Security Number 177 - 48 - 4974

b. Date of last employment 9-30-02  
 Employer George Anderson  
 Address Clearfield, Pa 16830

Salary/Wages..... \$ 72.00 weekly  
 Type of work Cook, Waitress, Cleaning

William A. Shaw  
 Prothonotary

FILED

APR 18 2005  
 0/3:30 PM  
 William A. Shaw  
 Prothonotary  
 W.C.K.

c. Other Income:

|   |    |                  |
|---|----|------------------|
| Business/Profession.....                                | \$ | n/a              |
| Self-employment.....                                    | \$ | n/a              |
| Interest.....   | \$ | n/a              |
| Dividends.....  | \$ | n/a              |
| Pension.....  | \$ | \$192.00 Monthly |
| Annuities.....  | \$ | n/a              |
| Social Security Benefits.....                           | \$ | n/a              |
| Support Payments.....                                   | \$ | n/a              |
| Disability payments.....                                | \$ | n/a              |
| Unemployment Compensation/<br>Supplements Benefits..... | \$ | n/a              |
| Workmen's Compensation.....                             | \$ | n/a              |
| Public Assistance.....                                  | \$ | n/a              |
| Food Stamps.....  | \$ | \$118.00 Monthly |
| Other.....  | \$ | n/a              |

d. Other contributions to my household support (please circle):

Name of Spouse, Boyfriend/Girlfriend, or Roommate/Housemate

n/a

Employer n/a

Salary/wages per month..... \$ n/a

Type of work n/a

Contributions from my child(ren)... \$ n/a

Contributions from my parent(s),  
family members, or any other  
individuals..... \$ n/a

e. Property Owned:

|                                   |     |         |
|-----------------------------------|-----|---------|
| Cash.....                         | \$  | n/a     |
| Checking Account.....             | \$  | n/a     |
| Savings Account.....              | \$  | n/a     |
| Certificates of Deposit.....      | \$  | n/a     |
| Real Estate (including home)..... | \$  | n/a     |
| Motor Vehicle(s) - Make           | n/a |         |
| Year                              | n/a | n/a n/a |
| Cost.....                         | \$  | n/a     |
| Amount owed.....                  | \$  | n/a     |

Stocks, bonds..... \$ n/a  
Other..... \$ n/a  
Other..... \$ n/a  
Other..... \$ n/a

f. I have the following debts:

Utilities: \$ 50.00, explain Fell Behind NO Income  
\$ n/a, explain Spouse Passed away  
\$ n/a, explain n/a  
\$ n/a, explain n/a  
Groceries: \$ 50.00, explain 4118.00 not enough for the Month  
Rent/Mortgage: \$ 5800, explain n/a  
Loan(s): \$ n/a, explain n/a  
Auto Expense: \$ 159.00, explain For Car not preferred  
Child Care: \$ n/a, explain n/a get  
Miscellaneous: \$ n/a, explain n/a

g. Person(s) dependent upon you for support:

Wife/Husband's name n/a

Children, if any:

|      |            |     |            |
|------|------------|-----|------------|
| Name | <u>n/a</u> | Age | <u>n/a</u> |
| Name | <u>n/a</u> | Age | <u>n/a</u> |
| Name | <u>n/a</u> | Age | <u>n/a</u> |
| Name | <u>n/a</u> | Age | <u>n/a</u> |
| Name | <u>n/a</u> | Age | <u>n/a</u> |
| Name | <u>n/a</u> | Age | <u>n/a</u> |

Other person(s) dependent upon you:

|      |            |     |            |
|------|------------|-----|------------|
| Name | <u>n/a</u> | Age | <u>n/a</u> |
| Name | <u>n/a</u> | Age | <u>n/a</u> |
| Name | <u>n/a</u> | Age | <u>n/a</u> |

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

## VERIFICATION

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. Section 4904, relating to Unsworn Falsification to Authorities.

4/17/05  
Date

Blonde G. Rauch  
Petitioner

CONSENT FOR RELEASE OF CONFIDENTIAL INFORMATION

I, Belinda G. Ravech, 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 employment 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 Number: 177 - 48 - 4974

Board of Assistance Number (food stamps, etc.): 40761

DATE: 4/17/05

Belinda G. Ravech  
signature

DATE: 04 / 17 / 05

NAME: Belinda g Rauch

TELEPHONE NUMBER: ( 814 ) 768 - 7465

ADDRESS: 145 Valley View Drive apt #3  
CFD, Pa 16830

OTHER PARTIES INVOLVED: ~~Mr~~ Robert D Wise

REASON FOR FILING THIS PETITION (Write a brief description of your financial problem(s), please be specific. Failure to do so could result in your request being delayed or denied.) (Example: request for filing fee or Mediation Conference fee to be waived due to your inability to submit the required fee because...)

getting only \$192.00 Monthly makes it  
really hard to make payment that has  
to be made. there is alot that has to  
be made. alot to other places that I  
can't pay because of income. I  
can no longer work I am applying for  
Disability for alot of health problems  
that Dr Davidson can tell you about

TYPE OF ACTION: (divorce, custody, District Justice appeal, etc. Please specify what type of action you are pursuing through this application.)

District Justice Appeal



copy

April 19, 2005

Re: Clearfield County Housing Authority vs. Belinda G. Rauch  
Case Number: 05-546-CD

Dear Belinda Rauch:

Please be advised that the action you filed in the above matter has been stricken effective April 19, 2005. The deadline to file your appeal has passed, and the court has denied you in forma pauperis status. You may not proceed with this action without good cause from the court.

Sincerely,

William A. Shaw  
Prothonotary/Clerk of Courts