

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

05-546-CD
Clfd. Co. Housing Auth. v. Belinda Rauch
2005-546-CD

In the Court of Common Pleas of Clearfield County, Pennsylvania

Clearfield County
Housing Authority
2221 Lundy Ave
Clearfield, Pa 16830

Civil Division

Rauch, Blinda G Plaintiff
Edgewood Apts apt/5th fl
Valley View vs.
Clearfield, Pa 16830

Defendant

2005-546-CD

No. 14-000049-05 C.D.

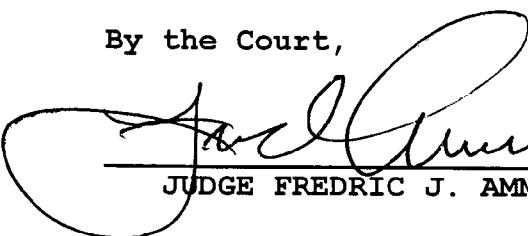
3/31/05

O R D E R

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 1000 letter
1/2/2005 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 Leavy Ave

Clearfield, Pa 16830

Ranch, Blinda G Plaintiff
Edgewood Apts Cpt/Ste H3
Valley View Drive
Clearfield, Pa 16830

Defendant

2005-546-CO

No. 14-0000129-05 C.D.
3/31/05

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.

APR 18 2005
03/30/05
William A. Shaw
Prothonotary
cc/c

a. Name Blinda G Ranch
Address 145 Valley View Drive Cpt H3
CFD, Pa 16830
Social Security Number 177 - 58 - 4974

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

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

c. Other Income:

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

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

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

n/a

Employer	<u>n/a</u>
Salary/wages per month.....	\$ <u>n/a</u>
Type of work	<u>n/a</u>
Contributions from my child(ren)...	\$ <u>n/a</u>
Contributions from my parent(s), family members, or any other individuals.....	\$ <u>n/a</u>

e. Property Owned:

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

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

f. I have the following debts:

Utilities: \$ 50.00, explain no income
n/a, explain fell behind spouse
n/a, explain passed away
n/a, explain n/a
Groceries: \$ 50.00, \$118.00 not enough for the month
Rent/Mortgage: \$ 58.00, explain n/a
Loan(s): \$ n/a, explain n/a
Auto Expense: \$ 159.00, explain Job not received yet
Child Care: \$ 0.00, explain n/a
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

Bluinda J. Rauch
Petitioner

CONSENT FOR RELEASE OF CONFIDENTIAL INFORMATION

I, Belinda J. Rauch, 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 J. Rauch

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: Atta 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 a lot that Has to
be Made. a lot to other places that I
can't Pay because of Income.
I can no longer work I am applying for
Disability for a lot 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