

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

**CRIMINAL RECORD / ABUSE HISTORY VERIFICATION**

<i>You must enter this information exactly as it appears on the custody complaint:</i>	Plaintiff(s)	:	
	vs.	:	NO. _____ - _____ -CD
	Defendant(s)	:	

I \_\_\_\_\_, hereby swear or affirm, subject to penalties of law including 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities that:

1. Unless indicated by my checking the box next to a crime below, neither I nor any other member of my household have been convicted, or pled guilty, or pled no contest, or was adjudicated delinquent where the record is publicly available pursuant to the Juvenile Act, 42 Pa.C.S. § 6307, to any of the following crimes in Pennsylvania or a substantially equivalent crime in any other jurisdiction, including pending charges:

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
[ ]	<b>18 Pa.C.S. Ch. 25</b> (relating to criminal homicide)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 2702</b> (relating to aggravated assault)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 2706</b> (relating to terroristic threats)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 2709.1</b> (relating to stalking)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 2901</b> (relating to kidnapping)	[ ]	[ ]	_____	_____

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
[ ]	<b>18 Pa.C.S. § 2902</b> (relating to unlawful restraint)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 2903</b> (relating to false imprisonment)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 2910</b> (relating to luring a child into a motor vehicle or structure)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3121</b> (relating to rape)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3122.1</b> (relating to statutory sexual assault)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3123</b> (relating to involuntary deviate sexual intercourse)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3124.1</b> (relating to sexual assault)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3125</b> (relating to aggravated indecent assault)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3126</b> (relating to indecent assault)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3127</b> (relating to indecent exposure)	[ ]	[ ]	_____	_____
[ ]	<b>18 Pa.C.S. § 3129</b> (relating to sexual intercourse with animal)	[ ]	[ ]	_____	_____

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	<b>18 Pa.C.S. § 3130</b> (relating to conduct relating to sex offenders)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 3301</b> (relating to arson and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 4302</b> (relating to incest)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 4303</b> (relating to concealing death of child)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 4304</b> (relating to endangering welfare of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 4305</b> (relating to dealing in infant children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 5902(b)</b> (relating to prostitution and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 5903(c) or (d)</b> (relating to obscene and other sexual materials and performances)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 6301</b> (relating to corruption of minors)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 6312</b> (relating to sexual abuse of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	<b>18 Pa.C.S. § 6318</b> (relating to unlawful contact with minor)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>18 Pa.C.S. § 6320</b> (relating to sexual exploitation of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>23 Pa.C.S. § 6114</b> (relating to contempt for violation of protection order or agreement)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>Driving under the influence of drugs or alcohol</b>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<b>Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device</b>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

2. Unless indicated by my checking the box next to an item below, neither I nor any other member of my household have a history of violent or abusive conduct including the following:

Check all that apply		Self	Other household member	Date
<input type="checkbox"/>	<b>A finding of abuse by a Children &amp; Youth Agency or similar agency in Pennsylvania or similar statute in another jurisdiction</b>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<b>Abusive conduct as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction</b>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<b>Other:</b> _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

**3. Please list any evaluation, counseling or other treatment received following conviction or finding of abuse:**

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**4. If any conviction above applies to a household member, not a party, state that person's name, date of birth and relationship to the child.**

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**5. If you are aware that the other party or members of the other party's household has or have a criminal/abuse history, please explain:**

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I verify that the information above is true and correct to the best of my knowledge, information or belief. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities.

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**Signature**

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**Printed Name**

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**Date**