

DIVORCE PACKET

IMPORTANT!!!

1. **YOU ARE RESPONSIBLE FOR SERVICE** of the Complaint! You **MUST** send a copy of the Divorce Complaint to the Defendant by **CERTIFIED MAIL, RETURN RECEIPT REQUESTED, TO BE SIGNED BY THE ADDRESSEE ONLY**. (For further instructions on this procedure, contact your local post office.), **OR** you may have the Defendant sign the **“Acceptance of Service” form which is included in this packet**.
 - You **MUST FILE** the Return Receipt (Green Card from the Post Office) or the “Acceptance of Service” Form with the Prothonotary’s Office on the First Floor of the Clinton County Courthouse
 2. Ninety (90) days after service of Complaint is made, you may sign and date the Affidavit of Consent. Have the Defendant sign and date the other Affidavit of Consent form. **File the two Affidavit of Consent forms in the Prothonotary’s Office within 30 days after they are signed.**
 3. After filing the Affidavit of Consent, you **MUST mail or deliver the Notice of Intention to Request Entry of Divorce Decree and the Counter-Affidavit** under § 3301(c) of the Divorce Code to Defendant, **OR**, instead of mailing the Notice, **you may have the Defendant sign the Waiver of Notice Form** and file the form in the Prothonotary’s Office.
 4. Finally, wait at least twenty (20) days after mailing the Intention to Request Entry of Divorce Decree. (NOTE: If the Waiver of Notice was signed, you do not have to wait twenty days). Fill out the Praeceptum to Transmit Record form, sign it and take it or mail it to the Prothonotary’s Office to be filed. After this, you will be mailed a copy of the Decree granting you a Divorce.
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The forms being provided to you should only be used by those seeking a divorce on the grounds of mutual consent. If issues of custody, alimony, or division of marital property are involved, the forms **cannot** be used.

If using the forms, complete the following steps in the order they are numbered.

1. Fill out the Complaint in Divorce, the first page of which reads “NOTICE TO DEFEND AND CLAIM RIGHTS.” Fill out the Vital Records form which is attached to the Complaint. Fill out Entry of Appearance as a Self-Represented Party.
2. If you do not think you can pay the filing fee, you can ask the Court to waive the costs. The form you need to fill out to have the costs waived is the “Affidavit of In Forma Pauperis Status.” The Court will review this Affidavit and decide whether or not you will have to pay the costs.
3. Take the Complaint and other forms to the Prothonotary’s Office to be filed. Ask someone in the Prothonotary’s Office to make a copy of the Complaint.
4. If you have filled out the Affidavit of In Forma Pauperis Status to have the costs waived, you must file this form in the Prothonotary’s Office immediately after filing the Complaint.
5. Mail the copy of the Complaint to the Defendant by certified mail, restricted delivery, return receipt requested, immediately after filing the Complaint, or have the Defendant sign the “Acceptance of Service” form which is included in this packet. File the Return Receipt (Green Card) or the “Acceptance of Service” form with the Office of Prothonotary.
6. Wait at least 90 days after service of Complaint. Service of the Complaint means the date Defendant signs the “Green Card” or the “Acceptance of Service” form.
7. After at least 90 days, sign and date the Affidavit of Consent. Have the Defendant sign and date the other Affidavit of Consent form. File the two Affidavit of Consent forms in the Prothonotary’s Office within 30 days after they are signed.
8. Mail or deliver the Notice of Intention to Request Entry of Divorce Decree and the Counter-Affidavit under § 3301(c) of the Divorce Code to Defendant. Or, instead of mailing the Notice, have the Defendant sign the Waiver of Notice form and file the form in the Prothonotary’s Office.
9. Wait at least twenty days after mailing the Intention to Request Entry of Divorce Decree. (If the Waiver of Notice was signed, you do not have to wait twenty days). Fill out the Praecipe to Transmit Record form, sign it and take it or mail it to the Prothonotary’s Office to be filed.
10. You will be mailed a copy of the Decree granting you a divorce.
11. If you have questions about filling out the forms, call (570) 893-4014.

NOTICE TO DEFEND AND CLAIM RIGHTS

You have been sued in Court. If you wish to defend against the claims set forth in the following pages, you must take prompt action. You are warned that if you fail to do so, the case may proceed without you and a Decree of Divorce or annulment may be entered against you by the Court. A judgment may also be entered against you for any other claim or relief requested in these papers by the Plaintiff. You may lose money or property or other rights important to you, including custody or visitation of your children.

When the ground for divorce is indignities or irretrievable breakdown of the marriage, you may request marriage counseling. A list of marriage counselors is available in the Office of the Prothonotary which is on the first floor of the Clinton County Courthouse, Corner of Jay and Water Streets, Lock Haven, Pennsylvania.

IF YOU DO NOT FILE A CLAIM FOR ALIMONY, DIVISION OF PROPERTY, LAWYER'S FEES OR EXPENSES BEFORE A DIVORCE OR ANNULMENT IS GRANTED, YOU MAY LOSE THE RIGHT TO CLAIM ANY OF THEM.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP.

Court Administrator
Court of Common Pleas of Clinton County
Clinton County Courthouse
Lock Haven, PA 17745
(570) 893-4016

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
_____)
Defendant) IN DIVORCE

COMPLAINT IN DIVORCE
(Under Section 23 Pa. C.S.A. § 3301(c) - Mutual Consent)

1. Plaintiff is _____, Social Security
(name)
No. _____, who currently resides at _____,
(address)
_____, _____, _____,
(city) (county) (state)
_____, and has resided there since _____.
(telephone number) (date)

2. Defendant is _____, Social Security
(name)
No. _____, who currently resides at _____,
(address)
_____, _____, _____,
(city) (county) (state)
_____, and has resided there since _____.
(telephone number) (date)

3. _____ has/have been a bona fide resident(s)
(Plaintiff and/or Defendant)

in the Commonwealth for at least six months immediately previous to the filing of this
Complaint.

4. Plaintiff and Defendant were married on _____ at
(date)
_____, _____, _____.
(city) (county) (state)

5. There have been no prior actions of divorce or for annulment between the parties
except _____. (if no prior actions, leave
blank; if prior action indicate date and place of action.)

6. The marriage is irretrievably broken.

7. Plaintiff has been advised that counseling is available and that Plaintiff may have
the right to request that the Court require the parties to participate in counseling.

8. Plaintiff requests the Court to enter a Decree of Divorce.

I verify that the statements made in this Complaint 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.

(signature)
Plaintiff

Date: _____

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HEALTH
VITAL RECORDS

COUNTY

RECORD OF
DIVORCE OR ANNULLMENT
 (CHECK ONE)

STATE FILE NUMBER

STATE FILE DATE

HUSBAND

1. Name	(First)	(Middle)	(Last)	2. Date of Birth	(Month)	(Day)	(Year)
3. RESIDENCE	Street or R.D.		City, Boro. Or Twp.	County	State		
5. NUMBER OF THIS MARRIAGE	6. RACE		7. USUAL OCCUPATION				
	<input type="checkbox"/> WHITE	<input type="checkbox"/> BLACK	<input type="checkbox"/> OTHER (Specify)				

WIFE

8. MAIDEN Name	(First)	(Middle)	(Last)	9. Date of Birth	(Month)	(Day)	(Year)
10. RESIDENCE	Street or R.D.		City, Boro. Or Twp.	County	State		
12. NUMBER OF THIS MARRIAGE	13. RACE		14. USUAL OCCUPATION				
	<input type="checkbox"/> WHITE	<input type="checkbox"/> BLACK	<input type="checkbox"/> OTHER (Specify)				

15. PLACE OF THIS MARRIAGE	(County)	(State or Foreign County)	16. DATE OF THIS MARRIAGE	(Month)	(Day)	(Year)
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17A. NUMBER OF CHILDREN THIS MARRIAGE	17B. NUMBER OF DEPENDENT CHILDREN UNDER 18	18. PLAINTIFF	19. DECREE GRANTED TO
<input type="checkbox"/>	<input type="checkbox"/>	HUSBAND <input type="checkbox"/> WIFE <input type="checkbox"/>	HUSBAND <input type="checkbox"/> WIFE <input type="checkbox"/>
20. NUMBER OF CHILDREN TO CUSTODY OF HUSBAND WIFE SPLIT CUSTODY <input type="checkbox"/>		OTHER (Specify) <input type="checkbox"/>	

21. LEGAL GROUNDS FOR DIVORCE OR ANNULLMENT	22. DATE OF DECREE	(Month)	(Day)	(Year)	23. DATE REPORT SENT TO VITAL RECORDS	(Month)	(Day)	(Year)
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24. SIGNATURE OF TRANSCRIBING CLERK

**IN THE COURT OF COMMON PLEAS OF CLINTON COUNTY, PENNSYLVANIA
CIVIL ACTION – LAW**

Plaintiff)	No. _____ CV
)	IN DIVORCE
)	
vs)	
)	
Defendant)	

ORDER

AND NOW, this _____ day of _____, 20____, the Court having reviewed the Plaintiff’s Petition and Affidavit of In Forma Pauperis Status, **IT IS HEREBY**

ORDERED AND DIRECTED:

(____) That the request of _____, Plaintiff, to proceed in forma pauperis pursuant to Pa. R.C.P. §240(f) is **GRANTED**.

(____) That the request of _____, Plaintiff, to proceed in forma pauperis pursuant to Pa. R.C.P. §240(f) is **DENIED** for the following reason(s):

_____ Affidavit is Incomplete

_____ Other: _____

BY THE COURT:

J.

cc: _____, Plaintiff

**IN THE COURT OF COMMON PLEAS OF CLINTON COUNTY, PENNSYLVANIA
CIVIL ACTION – LAW**

Plaintiff)	No. _____ CV
)	IN DIVORCE
)	
vs)	
)	
)	
Defendant)	

AFFIDAVIT OF IN FORMA PAUPERIS STATUS

This Affidavit must be completed in its entirety. If a response is unknown or not applicable, indicate by UK or N/A.

1. I am the Plaintiff 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:** _____

Address: _____

Social Security Number: [last 4 numbers only] _____

(b) **Employment:** Are presently employed? Yes / No [circle one]

If you are presently employed, provide the following:

Name of Employer: _____

Address of Employer: _____

Gross Salary or Wages per Month: \$ _____

Bring Home Salary or Wages per Month: \$ _____

Type of Work: _____

Date Employment Started: _____

If NOT Currently Employed:

Last Date of Work: _____

Reason For Separation From Employer:

Terminated / Quit / Laid Off / Retired / Other _____ [circle one]

(c) Other income within past twelve (12) months:

Business or profession: \$ _____

Second Job: \$ _____

Self-Employment: \$ _____

Interest: \$ _____

Dividends: \$ _____

Pension or Annuities: \$ _____

Social Security Benefits: \$ _____

SSI Benefits: \$ _____

Support Payments: \$ _____

Disability Payments: \$ _____

Unemployment Compensation & Supplemental Benefits: \$ _____

Workers' Compensation: \$ _____

Public Assistance: \$ _____

Other: \$ _____

(d) Other Contributions to Household Support:

(Wife) (Husband) Name: _____

If your (Wife) (Husband) is Employed, State:

Employer: _____

Salary or Wages Per Month: \$ _____

Type of Work: _____

Contributions from Children: \$ _____

Contributions from Parents: \$ _____

Other Contributions: \$ _____

(e) Property Owned:

Cash: \$ _____

Checking Account: \$ _____

Savings Account: \$ _____

Certificates of Deposits: \$ _____

Real Estate (including home): \$ _____

Motor Vehicle: Make: _____ Year: _____

Cost: \$ _____ Amount Owed: \$ _____

Stocks, Bonds: \$ _____

Other: _____ \$ _____

(f) Debts and Obligations:

Mortgage: \$ _____

Rent: \$ _____

Loans: \$ _____

\$ _____

Are You Paying Support for Another Person/Child/Spouse: Yes / No

Amount: \$ _____

Other: \$ _____

\$ _____

(g) Persons Living in Your House:

Name: _____

Age: _____ Relationship: _____

Employment: _____ Monthly Wages: \$ _____

Name: _____

Age: _____ Relationship: _____

Employment: _____ Monthly Wages: \$ _____

Name: _____

Age: _____ Relationship: _____

Employment: _____ Monthly Wages: \$ _____

Name: _____

Age: _____ Relationship: _____

Employment: _____ Monthly Wages: \$ _____

(h) Is there a Custody Order in place? If so, attach a copy of Order.

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 the 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: _____

(signature) Petitioner

MAKE SURE YOU HAVE RESPONDED TO EACH QUESTION. AN INCOMPLETE AFFIDAVIT WILL RESULT IN A DENIAL.

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
) IN DIVORCE
_____,)
Defendant)

ACCEPTANCE OF SERVICE

I accept service of the Complaint in Divorce.

(date)

(signature)
Defendant

(mailing address of Defendant)

After signing this form, take it to the Prothonotary's Office to be filed or mail it to the Prothonotary's Office, Clinton County Court House, 230 E. Water St., Lock Haven, PA 17745.

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
_____,)
Defendant)
IN DIVORCE

AFFIDAVIT OF CONSENT

1. A Complaint in Divorce under Section 3301(c) of the Divorce Code was filed on _____.
(date Complaint filed in Prothonotary's Office)
2. The marriage of Plaintiff and Defendant is irretrievably broken and ninety days have elapsed from the date of the filing of the Complaint.
3. I consent to the entry of a final Decree of Divorce after service of Notice of Intention to Request Entry of the Decree.

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: _____ (signature)
(Plaintiff) or (Defendant) (circle one)

(Sign and file 90 days or more after Complaint is filed and served.)
(File within 30 days after signing)

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
_____,)
Defendant)
IN DIVORCE

AFFIDAVIT OF CONSENT

1. A Complaint in Divorce under Section 3301(c) of the Divorce Code was filed on _____.
(date Complaint filed in Prothonotary's Office)
2. The marriage of Plaintiff and Defendant is irretrievably broken and ninety days have elapsed from the date of the filing of the Complaint.
3. I consent to the entry of a final Decree of Divorce after service of Notice of Intention to Request Entry of the Decree.

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: _____ (signature)
(Plaintiff) or (Defendant) (circle one)

(Sign and file 90 days or more after Complaint is filed and served.)
(File within 30 days after signing)

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
_____)
Defendant)
IN DIVORCE

COUNTER-AFFIDAVIT UNDER § 3301(c) OF THE DIVORCE CODE

I wish to claim economic relief which may include alimony, division of property, lawyer's fees or expenses or other important rights.

I understand that I must file my economic claims with the Prothonotary in writing and serve them on the other party. If I fail to do so before the date set forth on the Notice of Intention to Request Divorce Decree, the Divorce Decree may be entered without further notice to me, and I shall be unable thereafter to file any economic claims.

I verify that the statements made in this Counter-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: _____

Plaintiff/Defendant

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
_____,)
Defendant)
IN DIVORCE

**Waiver of Notice of Intention to Request
Entry of a Divorce Decree under
§3301(c) of the Divorce Code**

1. I consent to the entry of a final Decree of Divorce without notice.
2. I understand that I may lose rights concerning alimony, division of property, lawyer's fees or expenses if I do not claim them before a divorce is granted.
3. I understand that I will not be divorced until a Divorce Decree is entered by the Court and that a copy of the Decree will be sent to me immediately after it is filed with the Prothonotary.

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: _____

Plaintiff/Defendant

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
)
) IN DIVORCE
_____,)
Defendant)

PRAECIPE TO TRANSMIT RECORD

To the Prothonotary:

Transmit the record, together with the following information, to the Court for entry of a Divorce Decree:

1. Grounds for divorce: irretrievable breakdown under Section 3301(c) of the Divorce Code.

2. Date and manner of service of the Complaint: (Circle method of service)

I mailed a copy of the Complaint to Defendant on _____; or
(date Complaint mailed)

Defendant signed the Acceptance of Service form on _____.
(date form signed)

3. Date of execution of the Affidavit of Consent required by Section 3301(c) of the Divorce Code: by Plaintiff _____; by Defendant
(date Plaintiff signed Affidavit)

_____.
(date Defendant signed Affidavit)

4. Related claims pending: none.

(signature)

(File after Affidavit of Consent forms have been signed by Plaintiff and Defendant and filed.)

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

_____,)
Plaintiff)
v.) NO. _____ (Civil)
_____)
Defendant)
IN DIVORCE

NOTICE OF INTENTION TO REQUEST ENTRY OF § 3301(c) DIVORCE DECREE

TO: _____
(Plaintiff) (Defendant)

You have signed a § 3301 (c) affidavit consenting to the entry of a divorce decree. Therefore, on or after _____, 20 _____, the other party can request the court to enter a final decree in divorce.

Unless you have already filed with the court a written claim for economic relief, you must do so by the date in the paragraph above, or the court may grant the divorce and you will lose forever the right to ask for economic relief. The filing of the form counter-affidavit alone does not protect your economic claims.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER. IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

Court Administrator
Court of Common Pleas of Clinton County
Clinton County Courthouse
Lock Haven, PA 17745
(570) 893-4016

PLAINTIFF

vs.

DEFENDANT

IN THE COURT OF COMMON PLEAS

COUNTY, PENNSYLVANIA

NO. _____

ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY

1. I am the Plaintiff Defendant in the above-captioned case.
2. I intend to represent myself in the custody, divorce, support, protection from abuse, paternity case.
3. **Check only one box in Question 3**
This is a new case and I am representing myself. I have decided not to hire an attorney to represent me.
OR
- This is not a new case and I am representing myself. I have decided not to hire an attorney to represent me.
OR
- This is not a new case. _____ previously
(Name of Attorney)
represented me in this case. I have decided not to be represented by that attorney and direct the Prothonotary to remove that attorney as my counsel of record in this case.
I have provided a copy of this form to that attorney listed above at the following address:

That attorney has acknowledged his/her withdrawal from this case by signing this form.
_____, Esq.
(Attorney signature)

4. I am entering my appearance as a self-represented party _____
(Your Signature)
5. I understand that I need to provide a street address or P.O. Box for the purpose of receiving all future pleadings and other legal notices. I further understand that this does not need to be my home address. My address for the purpose of receiving all future pleadings and other legal notices is:

I understand that this address will be the only address to which notices and pleadings in this case will be sent and that I am responsible to check the mail at this address so I do not miss important deadlines or proceedings.

I am not providing my address because I reside at a confidential location protected by the Protection From Abuse Act, 23 Pa. C.S. § 6112 and/or the Address Confidentiality Program, 23 Pa. C.S. § 6701-6713, and/or the Child Custody Act, 23 Pa. C.S. § 5336(b).

6. My telephone number where I can be reached is _____
- I am not providing my telephone number because it is confidential** pursuant to the Protection From Abuse Act, 23 Pa. C.S. § 6112 and/or the Child Custody Act, 23 Pa. C.S. § 5336(c).

7. **I UNDERSTAND I MUST FILE A NEW FORM EVERY TIME MY ADDRESS OR TELEPHONE NUMBER CHANGES.**

8. I understand that I must ensure that a copy of this form is served on all other attorneys or other self-represented parties at the following addresses as listed below: (Use reverse side if you need more space)

Name _____ Address _____

Name _____ Address _____

9. **I verify that the statements made in this Entry of Appearance as a Self-Represented Party are true and correct. I understand that if I make false statements herein, that I am subject to the criminal penalties of 18 Pa. C.S. § 4904 relating to unsworn falsification to authorities that could result in a fine and/or prison term.**

Date

(Your Signature)