COMMONWEALTH OF PENNSYLVANIA
COUNTY OF

PRAECIPE TO WAIVE FEES AND COSTS

Mag. Dist. No:
MDJ Name:
Address:

Telephone:

_____
v.
_____

Docket No:
Case Filed:

Kindly allow _____ to proceed without paying fees and costs.

I, _____, am the attorney for the party requesting a waiver of fees and costs, providing free legal services to the party, and reasonably believe the party is unable to pay the fees and costs.

I certify that this filing complies with the provisions of the Case Records Public Access Policy of the Unified Judicial System of Pennsylvania that require filing confidential information and documents differently than non-confidential information and documents.

_____
Attorney for _____

FREE INTERPRETER
www.pacourts.us/language-rights