



WASHINGTON COUNTY COURT OF COMMON PLEAS PRO SE CUSTODY PACKET

NOTICE

ALL PARTIES INVOLVED IN LITIGATION ARE STRONGLY ENCOURAGED TO SEEK PROFESSIONAL LEGAL ADVICE FROM AN ATTORNEY. Court staff cannot offer any legal advice. The information in this packet is not a substitute for professional legal advice. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents.

If you want to hire an attorney and do not know one, you should call the Bar Association's Lawyer Referral Service (LRS) at 724-225-6710 to schedule a half-hour consultation with a licensed, insured attorney who has experience in the area of law related to your legal matter. The initial half-hour consultation with the attorney is \$50.00 to be paid in advance to the Bar Association; any fees beyond the first half-hour should be discussed and agreed upon by you and the lawyer.

If you meet certain income and other qualifications, you may be able to secure an attorney through Southwestern PA Legal Services at 724-225-6170. Ask if you are eligible for the Bar Association/Bar Foundation "Limited Representation Custody Program," and, if so, you may be referred to an attorney who will represent you at no cost at the initial custody meeting.

If you have questions about domestic violence or believe that you may be the victim of domestic violence, we strongly recommend that you contact the *Washington County Domestic Violence Services* at 724-223-8349.

If you suspect child abuse, please contact *CHILDLINE* at 1-800-932-0313. You can report suspected child abuse 24 hours per day and remain anonymous.

PETITION FOR CONTEMPT

A copy of your current Custody Order must be attached to your Petition.

Motions Court for ALL Family Court Motions on **Tuesdays** in Courtroom No. 6. At 9:15 a.m. **Five (5) business days' notice shall be required.**

You **must** notify the court that you are appearing in Motions Court by dropping off a copy of your Petition for Contempt to the Judge's Chambers by Friday at 12:00 noon before you intend to appear before the Judge. Disregard for this prior notification to the court could result in you being turned away and asked to return the following week.

SUMMARY OF STEPS

Before you go to Court:

- 1. Complete the appropriate forms in BLUE ink, not pencil. Incomplete forms may be refused. A copy of your current Custody Order must be attached to your Petition.**
- 2. You must provide the other party and/or their attorney with a copy of the Petition at least five (5) business days' before going to Court.**
- 3. You must leave a copy of your Petition with the Judge's Office by Noon on the FRIDAY before you intend to present it to the Judge. Sign in on the contested motions' sheet and leave a copy of your Petition in the appropriate box.**

In Court:

- 4. TAKE YOUR ORIGINAL PETITION TO MOTIONS COURT**
- 5. The Judge will consider the petition and assign a hearing date, if needed. You will receive your original Petition back from the Judge's clerk.**

After you leave Court:

- 6. You are responsible for copying, filing and serving the paperwork on all named parties. File the original in the Prothonotary's Office (1st floor) and they will time-stamp your copies. (If you need copies, the charge is \$.25 per page).**
- 7. Serve the other party with a time-stamped copy of the Petition and Order signed by the Judge.**
- 8. Drop off a time-stamped copy to the Custody Office.**

IN THE COURT OF COMMON PLEAS OF WASHINGTON COUNTY
P E N N S Y L V A N I A

CIVIL DIVISION

_____	:	No. _____
Plaintiff,	:	
vs.	:	Type of Pleading:
	:	Petition for Civil Contempt for
	:	Disobedience of Custody Order
_____	:	
Defendant.	:	Filed on behalf of:
	:	
	:	_____
	:	(Your Name)

Filing Party's Information:

Name: _____

Address: _____

Telephone #: _____

IN THE COURT OF COMMON PLEAS OF WASHINGTON COUNTY
P E N N S Y L V A N I A

CIVIL DIVISION

Plaintiff, _____ :
vs. _____ : No. _____
Defendant. _____ :

ENTRY OF APPEARANCE OF SELF-REPRESENTED PARTY
PURSUANT TO Pa.R.C.P. No. 1930.8

I, _____, the Plaintiff or Defendant (circle one), represent myself in the within action.

REMOVAL OR WITHDRAWAL OF COUNSEL OF RECORD (If Applicable)

_____ Remove _____, Esquire, as my attorney of record.

_____ Withdraw my appearance for the filing party.

_____, Esq. (Please print) PA ID # _____

Date: _____

Attorney's Signature

I understand that I am under a continuing obligation to provide current contact information to the court, to other self-represented parties, and to attorneys of record.

All pleadings and legal papers can be served on me at the address listed below, which may or may not be my home address pursuant to Rule 1930.8:

Date: _____

Signature of Plaintiff or Defendant

Print Name,

Address

City, State, Zip Code

Fax number

Telephone number

THE PARTY FILING THIS ENTRY OF APPEARANCE MUST PROVIDE NOTICE BY SENDING A COPY TO ALL PARTIES AND ATTORNEYS INCLUDING THE ATTORNEY REMOVED FROM THE CASE.

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

_____,)
Plaintiff,)
)
-VS-) No. _____)
)
_____,)
Defendant.)

ORDER

AND NOW, this ____ day of _____, 20__ it is hereby,
ORDERED, ADJUDGED, and DECREED that pursuant to L-1915-12, this matter is being
referred to the Child Custody Conference Officer for conference and review. If a resolution
cannot be made at that time, the Child Custody Conference Officer shall refer the contempt
proceeding to the Court, who will set a date for the hearing.

BY THE COURT:

Date: _____ **J.**

**IN THE COURT OF COMMON PLEAS OF WASHINGTON COUNTY,
PENNSYLVANIA**

CIVIL DIVISION

Plaintiff)	
vs.)	No.
)	
)	
)	
)	
Defendant.)	

ORDER

AND NOW, this _____ day of _____, 2019, upon consideration of the Petition for Contempt filed by the _____, _____, it is hereby, **ORDERED, ADJUDGED, and DECREED** that a contempt hearing shall be held before the Child Custody Conference Officer _____ on the _____ day of _____, 20____, at _____ a.m./p.m. in the Family Court Center. The Child Custody Conference Officer shall make an effort to conciliate the matter. In the event that no resolution is reached, the Child Custody Conference Officer shall conduct and evidentiary hearing and prepare an Order disposing of the issues. That hearing shall be recorded. Either party may challenge the Order by filing exceptions within twenty (20) days.

BY THE COURT:

_____**J**

BRANDON NEUMAN, JUDGE

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

_____,)
Plaintiff,)
)
-VS-) No. _____
)
_____,)
Defendant.)

NOTICE AND ORDER TO APPEAR

Legal proceedings have been brought against you alleging you have willfully disobeyed an order of court for custody. If you wish to defend against the claim set forth in the following pages, you may but are not required to file in writing with the court your defenses or objections. Whether or not you file in writing with the court your defenses or objections, you must appear in person on the ____ day of _____, 20__ at _____ o'clock __.M. in Courtroom No. ____ of the Washington County Courthouse, 1 South Main Street, Washington, PA 15301.

IF YOU DO NOT APPEAR IN PERSON, THE COURT MAY ISSUE A WARRANT FOR YOUR ARREST AND YOU MAY BE COMMITTED TO JAIL.

If the court finds that you have willfully failed to comply with its order you may be found to be in contempt of court and committed to jail, fined or both.

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.

Washington County Bar Association
119 South College Street
Washington, PA 15301
724-225-6710

BY THE COURT:

Date: _____ **J.**

WHEREFORE, Petitioner requests that Respondent be held in contempt of court.

Petitioner Signature

Petitioner Name

(Street Address)

(City, State, Zip)

(Telephone)

VERIFICATION

I verify that the statements made in this petition 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: _____

Petitioner

IN THE COURT OF COMMON PLEAS OF WASHINGTON COUNTY, PENNSYLVANIA

CIVIL DIVISION

_____	}	
	}	
Plaintiff,	}	
	}	
Vs.	}	No. _____
	}	
_____	}	
	}	
Defendant.	}	

CRIMINAL RECORD/ABUSE HISTORY VERIFICATION

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 listed crime or offense, neither I nor a member of my household has been convicted, pled guilty, 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 or offenses in Pennsylvania or a substantially equivalent crime or offense in another state, including pending charges:

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	18 Pa.C.S. Ch. 25 (relating to criminal homicide)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2702 (relating to aggravated assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2706 (relating terroristic threats)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2709.1 (relating to stalking)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2901 (relating to kidnapping)	<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"/>	18 Pa.C.S. §2902 (relating unlawful restraint)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2903 (relating to false imprisonment)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3121 (relating to rape)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3122.1 (relating to statutory sexual assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3123 (relating to involuntary deviate sexual intercourse)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3124.1 (relating to sexual assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3125 (relating to aggravated indecent assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3126 (relating to indecent assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3127 (relating to indecent exposure)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3129 (relating to sexual intercourse with animal)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3130 (relating to conduct relating to sex offenders)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §3301 (relating to arson and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §4302 (relating to incest)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Revised: October 1, 2019

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	18 Pa.C.S. §4303 (relating to concealing death of child)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §4304 (relating to endangering welfare of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §4305 (relating to dealing in infant children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §5902(b) (relating to prostitution and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §6301 (relating to corruption of minors)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §6312 (relating to sexual abuse of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §6318 (relating to unlawful contact with minor)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §6320 (relating to sexual exploitation of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	23 Pa.C.S. §6114 (relating to contempt for violation of protection order or agreement)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	42 Pa.C.S. §62A14 (relating to contempt for violation of protection order or agreement)	<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"/>	Driving under the influence of drugs or alcohol	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device	<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 or involvement with a Children & Youth Agency including the following:

Check all that apply		Self	A household member	Child
<input type="checkbox"/>	A finding of abuse by a Children & Youth Or similar agency in Pennsylvania or similar agency in another state. Where? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Abusive conduct as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Involvement with Children & Youth or similar Agency in Pennsylvania or another jurisdiction. Where? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

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. _____

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

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.

Signature

Date: _____

Printed Name

Docket No. _____

CERTIFICATE OF COMPLIANCE WITH ADMINISTRATIVE ORDER NO. 2016-1

I, _____, certify that I have complied with Administrative Order 2016-1 as noted below:

Talked by phone _____
(date)

Met in person _____
(date)

Telephoned/Left a message _____
(date)

Unable to Confer because: _____

Other: _____

Domestic Violence Waiver _____

Date

Signature