

PRO SE INSTRUCTIONS FOR FILING A PETITION FOR CONTEMPT

This packet is designed to assist you in filing a Petition for Contempt. Please read all of the instructions below and be sure to complete **ALL** of the steps. There is a checklist included to help you keep track of the steps.

A self-represented party is expected to follow all state and local rules and procedures. Court personnel cannot give you legal advice. Likewise, court personnel cannot help you fill out these forms. If you have any further questions or need legal advice, you may need to speak to an attorney. You can also go to <http://www.pacourts.us/learn/representing-yourself/custody-proceedings> for further information about representing yourself in a custody matter.

- 1) Fill out all pages of the Petition for Contempt and the Criminal Record/Abuse History Affidavit. Take your time and print very neatly. Remember, this pleading will become an original Court document.
- 2) Fill out the **top portion only** of the proposed Order of Court. Do not fill out anything below the words "Order of Court". If your request for a hearing is granted, the Judge will sign this Order and the Court will fill in the conference date and time, which will later be mailed to you.
- 3) Complete the attached Confidential Information Form providing the child(ren)'s full name(s) and date(s) of birth, if this information has been omitted as confidential information in your Petition for Contempt.
- 4) Petitions for Contempt are presented during Motion Court of the Judge assigned to your custody action. Prior to giving notice to the opposing party, you should make sure Motion Court is scheduled for the day you wish to present your Petition for Contempt. You can access this information by going to the County's website (<https://www.butlercountypa.gov/>), hover over "Courts", then click on "Court Administration", and finally click on "Detailed Court Calendars". Scroll down to "Motions Court" for specific information. (You may also call the office at 724-284-5200).

You must follow the Butler County guidelines for Family Court Motion Court Practice. You **MUST** give notice of this Petition to the opposing party. (See #6 below for instructions on service).

Fill out the Motion Court Cover Sheet in full and make sure to include the date you are planning to appear at Motion Court in Section I.

If you feel that your Petition is of an emergency nature, you may contact the Prothonotary's Office for guidance in presenting your Petition outside of normal Motion Court protocol.

5) Assemble your **completed** paperwork in the following order:

- Motion Court Cover Sheet
- Proposed Order of Court
- Petition for Contempt
- Criminal Record/Abuse History Affidavit

- Make a copy of this entire packet to serve on the opposing party/parties. You must also serve them with a blank Criminal Record/Abuse History Affidavit.

6) You **MUST** give the opposing party/parties notice that you are filing this Petition at least Five (5) days prior to the date that you are presenting your Petition in Motion Court. You must follow the PA Rule of Civil Procedure 1915.12(d) for service, by giving the opposing party/parties a copy of the paperwork by regular mail, service by the Sheriff's Office or by personal service. Complete the Affidavit of Service by filling out the section which corresponds to the method you used to serve the opposing party/parties.

7) You will need to appear at the correct Motion Court according to your Judge assignment with the following **original** documents:

- Completed packet from #5 above,
- Confidential Information Form, if applicable, and
- Affidavit of Service

8) It is your choice as to whether or not to have an attorney present at Motion Court. You will need to dress appropriately and appear early at the courtroom to sign in with Court personnel. Court personnel will need to know what you are presenting to the Judge and whether it has been consented to or is being contested.

9) The Judge may do one of the following:

- a) Dismiss your Petition for Contempt and no further action is taken,
- b) Schedule a pre-hearing conference (15 minutes) before the Judge,
- c) Schedule a conference before the Custody Conciliator, or
- d) Schedule a Hearing before the Judge.

10) There is no filing fee for a Petition for Contempt; however, there may be other Court costs if the Judge directs the matter to be heard by the Custody Conciliator.

CUSTODY CONTEMPT CHECK LIST

Read each step completely and check off the step once it has been completed.

1. I have filled in (**please print**) the required information on the:

- Petition for Contempt;
- Criminal Record/Abuse History Affidavit;
- Proposed Order of Court;
- Confidential Information Form, if needed; and
- Motion Court Cover Sheet

2. I have picked a date to present my Petition to the assigned Judge in my case and have checked with the Butler County Court Administrator's office to make sure the Judge is available on that date.

3. I have made copies of my original completed paperwork outlined in Paragraph #5 of the Instructions, to serve on the opposing party/parties.

4. I have sent the above copies to each Respondent, either by regular mail, by using the Sheriff's Office to serve the Respondent(s), or by having someone else hand it to the Respondent(s).

5. I have filled out the **Affidavit of Service Form**, which indicates how I served the Respondent(s), and, if applicable, the person who personally served the Respondent(s) has filled out the Verification of Service section of the Affidavit of Service Form.

6. I will attend the assigned Motion Court and will bring with me the original **Motion Court Cover Sheet, proposed Order of Court, Petition for Contempt and Criminal Record/Abuse History Affidavit**. I will also bring the original **Confidential Information Form**, if applicable, and the original **Affidavit of Service Form**.

IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSLVANIA

Plaintiff(s) _____
vs
Defendant(s) _____
F.C. # _____

**PRO SE PETITION FOR CIVIL CONTEMPT
FOR DISOBEDIENCE OF CUSTODY ORDER**

1. The name(s) and address(es) of the Petitioner(s) is/are as follows:

2. The name(s) and address(es) of the other party(s) to this action are as follows:

3. On _____ an Order of Court was entered regarding
(Date of Order)
custody of the following minor child(ren): _____ A t
correct copy of the Order is attached to this Petition.

4. _____ has willfully failed to abide by the Order in that: _____

5. Petitioner has attached the Criminal Record/Abuse History Affidavit required pursuant to Pa.R.C.P. 1915.3-2.

WHEREFORE, Petitioner requests that _____ be held in contempt of Court.

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 P.A.C.S. § 4904 relating to unsworn falsification to authorities.

Petitioner's Signature

IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA

Plaintiff(s) : F.C. # _____
vs :

Defendant(s) :

ORDER OF COURT

AND NOW, this _____ day of _____, 20____, upon consideration of the Petition for Civil Contempt attached herewith, it is hereby ordered that this Petition shall be scheduled for a pre-hearing conference before the Court on the _____ day of _____, 20____, at _____ o'clock __.m., in Courtroom number ____.

Fifteen minutes shall be allotted for the pre-hearing conference. At the conclusion, the Court may dismiss the Petition, rule immediately on the merits of the Petition, schedule the Petition for further review by the Custody Conciliator, schedule the Petition for a hearing before the Court, or enter such other order as may be appropriate.

BY THE COURT

Judge

IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA

VS. FC #

- CRIMINAL RECORD/ABUSE HISTORY VERIFICATION
- REPORT OF CHILD ABUSE AND PROTECTIVE SERVICES REQUESTED BY COURT

1. Participants. Please list ALL members in your/the participant's household and attach sheets if necessary:

NAME	DATE OF BIRTH	ADDRESS	RELATIONSHIP TO CHILD/REN

____ Party requests their residence remain confidential as they are protected by the Protection From Abuse Act, 23 Pa.C.S. § 6112, or Domestic and Sexual Violence Victim Address Confidentiality Act, 23 Pa.C.S. § 6701-6713, or the Child Custody Act, 23 Pa.C.S. § 5336(b), or they are in the process of seeking protection under the same.

Please list ALL members in the opposing party's household and attach sheets if necessary:

NAME	DATE OF BIRTH	ADDRESS	RELATIONSHIP TO CHILD/REN

Party requests their residence remain confidential as they are protected by the Protection From Abuse Act, 23 Pa.C.S. § 6112, or Domestic and Sexual Violence Victim Address Confidentiality Act, 23 Pa.C.S. § 6701-6713, or the Child Custody Act, 23 Pa.C.S. § 5336(b), or they are in the process of seeking protection under the same.

SUBJECT CHILD/REN-Attach additional sheets if necessary:

NAME	DATE OF BIRTH

2. CRIMINAL OFFENSES. As to the following listed Pennsylvania crimes or offences, or another jurisdiction's substantially equivalent crimes or offenses, check the box next to any applicable crime or offense in which you or a household member:

- Has pleaded guilty or no contest;
- Has been convicted;
- Has charges pending; or
- Has been adjudicated delinquent under the Juvenile Act, 42 Pa.C.S. § 6301-6375, and the record is publicly available as set forth in 42 Pa.C.S. § 6307.

You should also check the box next to a listed criminal offense even if the offense has been resolved by Accelerated Rehabilitative Disposition (ARD) or another diversionary program, unless it has been expunged pursuant to 18 Pa.C.S. § 9122, or a Court has entered an Order for limited access, e.g., Clean Slate, pursuant to 18 Pa.C.S. § 9122.1 or 9122.2.

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. §2701 (relating to simple assault)	<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. §2705 (relating to recklessly endangering another person)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2706 (relating to 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. §2718 (relating to strangulation)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2901 (relating to kidnapping)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2902 (relating to unlawful restraint)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

[] 18 Pa.C.S. §2903 [] [] _____

(relating to false imprisonment)

[] 18 Pa.C.S. §2704 [] [] _____

(relating to interference with custody of children)

[] 18 Pa.C.S. §2910 [] [] _____

(relating to luring a child into a motor vehicle or structure)

[] 18 Pa.C.S. Ch. 30 [] [] _____

(relating to human trafficking)

[] 18 Pa.C.S. §3121 [] [] _____

(relating to rape)

[] 18 Pa.C.S. §3122.1 [] [] _____

(relating to statutory sexual assault)

[] 18 Pa.C.S. §3123 [] [] _____

(relating to involuntary deviate sexual intercourse)

[] 18 Pa.C.S. §3124.1 [] [] _____

(relating to sexual assault)

[] 18 Pa.C.S. §3125 [] [] _____

(relating to aggravated indecent assault)

[] 18 Pa.C.S. §3126 [] [] _____

(relating to indecent assault)

[] 18 Pa.C.S. §3127 [] [] _____

(relating to indecent exposure)

[] 18 Pa.C.S. §3129 [] [] _____

(relating to sexual intercourse with animal)

[] 18 Pa.C.S. §3130 [] [] _____

(relating to conduct relating to sex offenders)

[] 18 Pa.C.S. §3301 [] [] _____

(relating to arson and related offenses)

[] 18 Pa.C.S. §4302 [] [] _____

(relating to incest)

[]	18 Pa.C.S. §4303	[]	[]	_____	_____
(relating to concealing death of child)					
[]	18 Pa.C.S. §4304	[]	[]	_____	_____
(relating to endangering welfare of children)					
[]	18 Pa.C.S. §4305	[]	[]	_____	_____
(relating to dealing with infant children)					
[]	18 Pa.C.S. §5533	[]	[]	_____	_____
(relating to cruelty to animal)					
[]	18 Pa.C.S. §5534	[]	[]	_____	_____
(relating to aggravated cruelty to animal)					
[]	18 Pa.C.S. §5543	[]	[]	_____	_____
(relating to animal fighting)					
[]	18 Pa.C.S. §5544	[]	[]	_____	_____
(relating to possession of animal fighting paraphernalia)					
[]	18 Pa.C.S. §5902(b)	[]	[]	_____	_____
(relating to prostitution and related offenses)					
[]	18 Pa.C.S. §5903(c) or (d)	[]	[]	_____	_____
(relating to obscene and other sexual material and performances)					
[]	18 Pa.C.S. §6301	[]	[]	_____	_____
(relating to corruption of minors)					
[]	18 Pa.C.S. §6312	[]	[]	_____	_____
(relating to sexual abuse of children)					
[]	18 Pa.C.S. §6318	[]	[]	_____	_____
(relating to unlawful contact with minor)					
[]	18 Pa.C.S. §6320	[]	[]	_____	_____
(relating to sexual exploitation of children)					
[]	Finding of contempt of a Protection From Abuse Order or agreement under 23 Pa.C.S. §6114	[]	[]	_____	_____

[] Finding of contempt of a Protection of Victims of Sexual Violence and Intimidation Order or agreement under 42 Pa.C.S. § 62A14 [] [] _____ _____

[] Driving under the influence of drugs or alcohol [] [] _____ _____

[] Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device [] [] _____ _____

3. Abuse or Agency Involvement. Check the box next to any statement that applies to you, a household member, or your child.

Check All That Apply	Self Other household member	Date
[] Involvement with a Children and Youth social service agency in Pennsylvania or a similar agency in another jurisdiction.	[] []	_____
What jurisdiction? _____		
[] A determination or finding of abuse (i.e., indicated or founded report) by a Children and Youth social service agency or Court in Pennsylvania or a similar agency or Court in another jurisdiction.	[] []	_____
What jurisdiction? _____		
[] An adjudication of dependency involving this child or any other child under Pennsylvania's Juvenile Act, or similar law in another jurisdiction.	[] []	_____
What jurisdiction? _____		
Is the case active? _____		
[] A history of perpetrating "abuse" as that term is defined in the Protection From Abuse Act, 23 Pa.C.S. § 6102.	[] []	_____

A history of perpetrating "sexual violence: or "intimidation" as those terms are defined in 42 Pa.C.S. § 62A03 (relating to protection of victims of sexual violence and intimidation). _____

Other: _____ _____

4. If you checked a box in (2) or (3), list any evaluation, counseling, or other treatment received as a result:

5. If you checked a box in (2) or (3) that applies to your household member, who is not a party, state that person's name, date of birth, and relationship to the child.

6. If you are aware that the other party or the other party's household member has a criminal record or abuse history, please explain:

**ONLY A PARTY CAN SIGN THIS FORM. IF A PARTY IS REPRESENTED BY AN ATTORNEY,
THE ATTORNEY CANNOT SIGN THIS FORM ON BEHALF OF THE PARTY.**

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. Section 4904 relating to unsworn falsification to authorities.

Date

Plaintiff/Defendant Signature

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

Signature of Filer

Printed Name

Instructions for Completing the Confidential Information Form

The following information is confidential and shall not be included in any document filed with a court or custodian, except on a Confidential Information Form filed contemporaneously with the document:

1. Social Security Numbers
2. Financial Account Numbers, except an active financial account number may be identified by the last four digits when the financial account is the subject of the case and cannot otherwise be identified. "Financial Account Numbers" include financial institution account numbers, debit and credit card numbers, and methods of authentication used to secure accounts such as personal identification numbers, user names and passwords.
3. Driver License Numbers
4. State Identification (SID) Numbers
5. Minors' names and dates of birth except when a minor is charged as a defendant in a criminal matter (see 42 Pa.C.S. § 6355). "Minor" is a person under the age of eighteen.
6. Abuse victim's address and other contact information, including employer's name, address and work schedule, in family court actions as defined by Pa.R.C.P. No. 1931(a), except for victim's name. "Abuse Victim" is a person for whom a protection order has been granted by a court pursuant to Pa.R.C.P. No. 1901 et seq. and 23 Pa.C.S. § 6101 et seq. or Pa.R.C.P. No. 1951 et seq. and 42 Pa.C.S. § 62A01 et seq. **If necessary, this information must be provided on the separate Abuse Victim Addendum. Please note there are separate instructions for the completion of the Addendum located on the form.**

Please note this form does not need to be filed in types of cases that are sealed or exempted from public access pursuant to applicable authority (e.g. juvenile, adoption, etc.).

- **The best way to protect confidential information is not to provide it to the court. Therefore, only provide confidential information to the court when it is required by law, ordered by the court or is otherwise necessary to effect the disposition of a matter.**
- Do not include confidential information in any other document filed with the court under this docket.
- If you need to refer to a piece of confidential information in a document, use the alternate references. If you need to attach additional pages, sequentially number each alternate reference – i.e. SSN 3, SSN 4, etc.
- This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

A court or custodian is not required to review or redact any filed document for compliance with the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania*. A party's or attorney's failure to comply with this section shall not affect access to case records that are otherwise accessible. If a filed document fails to comply with the requirements of the above referenced policy, a court of record may, upon motion or its own initiative, with or without a hearing, order the filed document sealed, redacted, amended or any combination thereof; a magisterial district court may, upon request or its own initiative, redact, amend or both. A court of record may impose sanctions, including costs necessary to prepare a compliant document for filing in accordance with applicable authority.

CONFIDENTIAL INFORMATION FORM

*Public Access Policy of the Unified Judicial System of Pennsylvania:
Case Records of the Appellate and Trial Courts*
204 Pa. Code § 213.81
www.pacourts.us/public-records

(Party name as displayed in case caption)

Docket/Case No.

Vs.

(Party name as displayed in case caption)

Court

This form is associated with the pleading titled _____, dated _____.

Pursuant to the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts*, the Confidential Information Form shall accompany a filing where confidential information is required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter. This form, and any additional pages, shall remain confidential, except that it shall be available to the parties, counsel of record, the court, and the custodian. This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

This Information Pertains to:	Confidential Information:	References in Filing:
(full name of adult) OR This information pertains to a minor with the initials of _____ and the full name of _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): Financial Account Number (FAN): Driver License Number (DLN): State of Issuance: State Identification Number (SID):	Alternative Reference: SSN 1 Alternative Reference: FAN 1 Alternative Reference: DLN 1 Alternative Reference: SID 1
(full name of adult) OR This information pertains to a minor with the initials of _____ and the full name of _____ (full name of minor) and date of birth: _____	Social Security Number (SSN): Financial Account Number (FAN): Driver License Number (DLN): State of Issuance: State Identification Number (SID):	Alternative Reference: SSN 2 Alternative Reference: FAN 2 Alternative Reference: DLN 2 Alternative Reference: SID 2

Additional page(s) attached. _____ total pages are attached to this filing.

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.

Signature of Attorney or Unrepresented Party

Name: _____

Date

Attorney Number: (if applicable) _____

Address: _____

Telephone: _____

Email: _____

NOTE: Parties and attorney of record in a case will have access to this Confidential Information Form. Confidentiality of this information must be maintained.

Additional page (if necessary)

This Information Pertains to:	Confidential Information:	References in Filing:
<p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN _____</p> <p>Alternative Reference: FAN _____</p> <p>Alternative Reference: DLN _____</p> <p>Alternative Reference: SID _____</p>
<p>(full name of minor) and date of birth: _____</p>		
<p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN _____</p> <p>Alternative Reference: FAN _____</p> <p>Alternative Reference: DLN _____</p> <p>Alternative Reference: SID _____</p>
<p>(full name of minor) and date of birth: _____</p>		
<p>(full name of adult)</p> <p>OR</p> <p>This information pertains to a minor with the initials of _____ and the full name of _____</p>	<p>Social Security Number (SSN): _____</p> <p>Financial Account Number (FAN): _____</p> <p>Driver License Number (DLN): _____</p> <p>State of Issuance: _____</p> <p>State Identification Number (SID): _____</p>	<p>Alternative Reference: SSN _____</p> <p>Alternative Reference: FAN _____</p> <p>Alternative Reference: DLN _____</p> <p>Alternative Reference: SID _____</p>
<p>(full name of minor) and date of birth: _____</p>		

IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA

VS.

: F.C. #

;

;

;

;

;

AFFIDAVIT OF SERVICE

My name is _____.
My address is _____.

**Motion Court Cover Sheet, proposed Order of Court, Petition for Contempt
and Criminal Record/Abuse History Affidavit**

____ I do hereby verify that I served a true and correct copy of the above forms, which were filed in the above-captioned matter, upon the Respondent(s) _____ by first class mail, on the _____ day of _____, 20____, addressed as follows:

-OR-

I do hereby verify that I presented a certified copy of the above forms to the Sheriff's Office to be served upon the Respondent(s).

-OR-

VERIFICATION OF SERVICE

I do hereby verify that _____ personally handed a certified copy of the above forms to the Respondent(s).

Date and time of service:

Location of service:

Signature of person providing service

I verify that the statements made in this verification are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. § 4904 relating to unsworn falsification to authorities.

Date

Signature of Petitioner

IN THE COURT OF COMMON PLEAS OF BUTLER COUNTY, PENNSYLVANIA

vs.

: F.C. # _____
:
: DRS DOCKET #: _____
: PACSES #: _____
:

I. Notice

You are hereby notified that the attached matter will be presented to assigned
Judge _____ on _____ at _____ in
their Motion Court.

II. Certificate of Notice/Service

I gave prior notice of presentation and a copy of this document to:

on _____ at _____ by: _____

Electronic Mail Fax Mail Other _____

Judge Assignment:

Judge Robinson Judge Palumbi Other _____

SELECT ONE: *A box must be selected*

Concerning the within request for relief, the opposing party:

OPPOSES

CONSENTS

I certify that all of the above statements are true and correct.

Date:

Signature:

Counsel for: