This form is approved by the Illinois Supreme Court and is required to be used in the Supreme Court.

Instructions <b>▼</b>	THIS ADDEAL INVOLVES A MATTER SUBJECT TO EVE	EDITED DISPOSITION LINDED		
Check the box to the	☐ THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER			
right if your case	RULE 311(a).			
involves parental	Coop No.			
responsibility or	Case No.:	·		
parenting time (custody/visitation				
rights) or relocation of				
a child.				
Enter the Supreme	IN THE			
Court case number if one has been assigned.	SUPREME COURT OF ILLINOIS			
If the case name in the		Appeal from the Appellate		
trial and/or appellate	In me			
court began with "In	In re	Court, District		
re" (e.g., "In re Marriage of Jones"),		No		
enter that name. Below				
that, enter the names of		Annual for a the Otto # O		
the parties as they	Plaintiff/Petitioner in trial court (First, middle, last names)	Appeal from the Circuit Court		
appeared in the trial/appellate court,	Plaintin/Petitioner in that court (First, middle, last hames)	of County		
and check the correct	☐ Appellant ☐ Appellee			
boxes to show which		Trial Court Case No.:		
party filed the appeal in the Supreme Court		mai Court Case No		
("appellant") and which	V.			
party is responding to				
the appeal ("appellee").		Honorable		
To the for right enter the	Defendant/Respondent in trial court (First, middle, last names)	i ionoi able		
To the far right, enter the number of the appellate	,			
district, appellate court	Appellant Appellee	Judge, Presiding		
case number, trial court				
county, trial court case number, and trial judge's				
name.				
		_		
	APPLICATION FOR WAIVER OF COUR (SUPREME COURT)	T FEES		
	(SOFREME COOKT)			
NOTE:	If you are completing this form on behalf of a minor or an incon			
NOTE.	information on this form instead of your ow	n information.		
In <b>1a</b> , enter your full	Pursuant to Illinois Supreme Court Rule 313(f), Illinois	Sunreme Court Pule 202 and		
name.		Oupreme Court Nuie 250 and		
	<u>735 ILCS 5/5-105</u> , I state:			
In <b>1b</b> , only enter the year you were born.	1. I believe I cannot afford to pay the court fees in this ca	ase and I am providing the		
DO NOT enter your	3 · · · · · · · · · · · · · · · · · · ·			
entire date of birth.	following information about myself:			
	a. Name:	Last		
In <b>1c</b> , enter your complete current		Lası		
address.				
	c. Street Address:			
In <b>2</b> , if you are currently incarcerated,	City, State, ZIP:			
attach a copy of your	O Low comments incommented	immedia I.D. #		
inmate trust fund ledger	2. I am currently incarcerated.  Yes No If yes,	ınmate I.D. #		

for the last 6 months or your *Application* will

be rejected.

If yes, I am attaching a copy of my inmate trust fund ledger for the last six (6) months.

\*\*If you answered "Yes" in section 2, skip section 3, 4, and 5 and sign below.\*\*

	Enter the Case	Number given by the Supreme Court Clerk:				
In <b>3a</b> , enter the number of people age 18 and older living in your house who you support. Support means that the		adults (not counting myself) who live children under 18 who live with me	with me.			
people rely on you financially.	4. I have received 1 or mo  ☐ Yes ☐ No	ore of the benefits listed below in the p	east 4 weeks:			
In <b>3b</b> , enter the number of people under age 18 living in your house who you support.	<ul> <li>Supplemental Security Income (SSI) (Not Social Security)</li> <li>Aid to the Aged, Blind and Disabled (AABD)</li> <li>Temporary Assistance to Needy Families (TANF)</li> <li>State Children &amp; Family Assistance</li> </ul>					
In 4, check "Yes" if you are currently receiving 1 or more of the benefits listed below.	<ul> <li>SNAP (Food State</li> </ul>	<ul> <li>SNAP (Food Stamps)</li> <li>General Assistance (GA), Transitional Assistance or State Children and Family</li> </ul>				
If you check "Yes" in 4, skip 5 and sign the form. You do not have to complete 5.	735 ILCS 5/5-105(a)	ed "Yes" in section 4, you qualify for a ()(2)(i) and (b)(1). You can skip section 5 on 4, so I am providing the following fi	and sign the form.**			
In <b>5a</b> , check "Yes" if you have applied for at least 1 of the benefits listed in section 4.	a. I have applied for 1 o ☐ Yes ☐ No	or more of the benefits listed in section 4: g money each month. (check all that apply)				
In <b>5b</b> , check the box for each type of money you have received in the past month. Also enter the gross (before taxes) amount for each type.	<ul><li></li></ul>	\$ Social Security (not \$ Unemployment: \$ r household members:				
Under <b>Other</b> in 5 <b>b</b> and 5 <b>c</b> , include any money received from family or friends.	Total of all money red	ng total amount of money in the past 12 r				
In <b>5c</b> , check the box for each type of money you have received in the past 12 months. Also enter the gross (before taxes) amount for each type.	<ul><li>☐ Child support:</li><li>☐ Pension:</li><li>☐ Money from other</li><li>☐ Other (list type and</li><li>☐ No income</li></ul>	\$ Unemployment:  \$ r household members:	\$ \$ \$			
In <b>5d</b> , check all of your debts and expenses for the past month and list the amount of money you pay each month for that expense.	d. My current monthly d Rent: Home Mortgage: Other Mortgage: Utilities: Food: Medical: Car Loan:	· · · · · · · · · · · · · · · · · · ·	ck all that apply)			

per month

per month

\$

\$

☐ Childcare

☐ Child Support

Enter the Case Number given by the Supreme Court Clerk:					
Other expenses not listed above (list type and amount):					
		· · · · · · · · · · · · · · · · · · ·	_\$		
	Other debts not listed above (list type and amount):				
			\$		
	☐ I have no expenses				
	Total of all expenses: _\$ pe	er month			
In <b>5e</b> , check all of the items owned by you and list the value of each item. If you own real estate, include the total you owe on any mortgage.	e. I have the belongings listed below. (ch  Bank accounts and cash totaling:  Home worth:  The total I owe on my home mo  Other real estate, not including the  The total I owe on my other mo	rtgage is:  house I live in, worth:  tgage is:  he 1st vehicle is paid off:  Yes	s 🗌 No		
	2nd vehicle worth: \$		s 🗌 No		
Under Illinois Supreme Court Rule 137, your signature means that you have read the document, that to the best of your belief, it is true and correct and that you are not filing it for an improper purpose, such as to cause delay.	Other (list items and value):  None of the above    Sl   Your Signature	\$ Street Address			
	Print Your Name	City, State, ZIP			
If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign by hand and print your name. Enter your complete current address and telephone number.  If you are filling out	Relationship to Minor or Incompetent Adult (if applicable)	Telephone			
this form for a minor or incompetent adult, sign and print your name and state your relationship to that person. Enter your complete current address and telephone number.					
GETTING COURT DOCUMENTS BY EMAIL: If you agree to receive court documents by email, check the box below and enter your email address. You should use an email account that you do not share with anyone else and that you check every day. If you do not check your email every day, you may miss important information or notice of court dates. Other parties may still send you court documents by mail.					
	☐ I agree to receive court documents at this e	email address during my entire ca	ase.		
	Email				