

**STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE 17TH JUDICIAL CIRCUIT
WINNEBAGO COUNTY**

FILE STAMP

Plaintiff
vs.

Defendant

Case No. _____

Judge Assigned: _____

**SUPPLEMENTAL FORM
(APPLICATION FOR WAIVER OF FEES)**

Application Requested By:

Name: _____

Home Phone: _____

Cell Phone: _____

TO REQUEST A WAIVER OF COURT FEES DUE TO FINANCIAL HARDSHIP, YOU MUST SUBMIT THE FOLLOWING DOCUMENTS IN SUPPORT OF YOUR APPLICATION.

IF YOU ARE CLAIMING ELIGIBILITY BECAUSE: You Receive:	THEN PROVIDE:
<input type="checkbox"/> Supplemental Security Income (SSI); <input type="checkbox"/> Aid to the Aged, Blind and Disabled (AABD); <input type="checkbox"/> Temporary Assistance for Needy Families (TANF); <input type="checkbox"/> Food Stamps (SNAP); <input type="checkbox"/> General Assistance, Transitional Assistance, or State Children and Family Assistance.	<input type="checkbox"/> Copies of documents showing your <u>current</u> eligibility
<input type="checkbox"/> Your household income is less than 125% of the current poverty level.	<p style="text-align: center;">(at least one, but as many as are available)</p> <input type="checkbox"/> Copy of a year-to-date paystub <input type="checkbox"/> Copy of Last year's W2; and/or 1099s <input type="checkbox"/> Copy of Last year's tax return.

NOTICE TO APPLICANT

**The Circuit Clerk's office will contact you by phone 1-4 business days from the date of filing with the judge's decision.
A voicemail message will constitute proper notification by this office.**

IF YOUR WAIVER IS GRANTED The following applies:	IF YOUR WAIVER IS DENIED The following applies:
<input type="checkbox"/> You will be required to return to the Circuit Clerk's Office within 5 business days of our phone notification to pick up your personal documentation, receive copies, and to complete any necessary paperwork for your court case.	<input type="checkbox"/> You will be required to return to the Circuit Clerk's Office within 5 business days of our phone notification to pick up your personal documentation, and receive copies; <input type="checkbox"/> Instructions on the payment of filing fees will be given by the Circuit Clerk's office; <input type="checkbox"/> Failure to pay the appropriate filing fees as instructed by the court may result in a judgment against you or the dismissal of your case.

Clerk's Office is NOT responsible for retaining original documents. All supplemental income verification documents will be shredded if not picked up within the allotted 5 day time period.

Litigants Signature _____

Deputy Circuit Clerk _____

Pursuant to Illinois Statute (705 ILCS 110 / 1) the Circuit Clerk's Office is unable to assist in the preparation of documents or give any legal advice.

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY	APPLICATION FOR WAIVER OF COURT FEES	<i>For Court Use Only</i>
Instructions ▼ Directly above, enter the name of the county where the case was filed. Enter the name of the person who started the lawsuit as Plaintiff/Petitioner. Enter the name of the person being charged as Defendant/Respondent. Enter the Case Number given by the Circuit Clerk or leave this blank if you do not have one.	_____ Plaintiff / Petitioner <i>(First, middle, last name)</i> v. _____ Defendant /Respondent <i>(First, middle, last name)</i>	_____ Case Number

NOTE: If you are completing this form on behalf of a minor or an incompetent adult, provide that person's information on this form instead of your own information.

Pursuant to [Illinois Supreme Court Rule 298](#) and [735 ILCS 5/5-105](#), I state:

In 1a , enter your full name
In 1b , only enter the year you were born. DO NOT enter your entire date of birth.
In 1c , enter your complete current address.
In 2a , enter the number of people age 18 and older living in your house who you support. Support means that the people rely on you financially.
In 2b , enter the number of people under age 18 living in your house who you support.
In 3 , check "Yes" if you are currently receiving 1 or more of the benefits listed below.
If you check "Yes" in 3 , skip 4 and sign the form. You do not have to complete 4 .

1. I believe I cannot afford to pay the court fees in this case and I am providing the following information about myself:

- a. Name: _____

First
Middle
Last
- b. Year of Birth: _____
- c. Street Address: _____
 City, State, ZIP: _____

2. I am providing the following information about people who live with me:

- a. I support _____ adults *(not counting myself)* who live with me.
- b. I support _____ children under 18 who live with me.

3. I am receiving 1 or more of the benefits listed below:

- Yes No
- Supplemental Security Income (SSI) (Not Social Security)
 - Aid to the Aged, Blind and Disabled (AABD)
 - Temporary Assistance to Needy Families (TANF)
 - SNAP (Food Stamps)
 - General Assistance (GA), Transitional Assistance, or State Children and Family Assistance

****If you answered "Yes" in section 3, you qualify for a fee waiver under [735 ILCS 5/5-105\(a\)\(2\)\(i\) and \(b\)\(1\)](#). You can skip section 4 and sign the form.****

In **4a**, check "Yes" if you have applied for at least 1 of the benefits listed in section 3.

In **4b**, 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.

Under **Other** in **4b** and **4c**, include any money received from family or friends.

In **4c**, 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.

In **4d**, check all of your debts and expenses for the past month and list the amount of money you pay each month for that expense.

4. I checked "No" in section 3, so I am providing the following financial information:

a. I have a pending application for 1 or more of the benefits listed in section 3:

Yes No

b. I received the following money in the past month. *(check all that apply)*

- My employment: \$ _____ Social Security (not SSI): \$ _____
- Child support: \$ _____ Unemployment: \$ _____
- Pension: \$ _____
- Money from other household members: \$ _____
- Other *(list type and amount)*: _____ \$ _____
- No income

Total of all money received in the past month: \$ _____

c. I received the following total amount of money in the past 12 months. *(check all that apply)*

- My employment: \$ _____ Social Security (not SSI): \$ _____
- Child support: \$ _____ Unemployment: \$ _____
- Pension: \$ _____
- Money from other household members: \$ _____
- Other *(list type and amount)*: _____ \$ _____
- No income

Total of all money received in the past 12 months: \$ _____

d. My current monthly debts and expenses are listed below. *(check all that apply)*

- Rent: \$ _____ per month
- Home Mortgage: \$ _____ per month
- Other Mortgage: \$ _____ per month
- Utilities: \$ _____ per month
- Food: \$ _____ per month
- Medical: \$ _____ per month
- Car Loan: \$ _____ per month
- Childcare: \$ _____ per month
- Child Support: \$ _____ per month
- 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: \$ _____ per month

In **4e**, 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. (check all that apply)

- Bank accounts and cash totaling: \$ _____
- Home worth: \$ _____
The total I owe on my home mortgage is: \$ _____
- Other real estate, not including the house I live in, worth: \$ _____
The total I owe on my other mortgage is: \$ _____
- 1st vehicle worth: \$ _____ The 1st vehicle is paid off: Yes No
- 2nd vehicle worth: \$ _____ The 2nd vehicle is paid off: Yes No
- Other (list items and value): _____ \$ _____
- None of the above

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.

/s/
Your Signature *Street Address*

Print Your Name *City, State, ZIP*

Relationship to Minor or Incompetent Adult (if applicable) *Telephone*

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name. Enter your complete current address and telephone.

If you are filling out 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 email address during my entire case.

Email

Getting Started

Application for Waiver of Court Fees

IMPORTANT: This getting started guide and the instructions are not legal advice. They are only meant to help you learn how to use the *Application for Waiver of Court Fees* forms. Your use of the forms does not guarantee you will be successful in court.

To learn how to fill out the forms and file them with the court, read the *How to Ask the Court to Participate in a Court Case for Free or at a Reduced Cost* instruction sheet and the instructions on the forms.

Names of the forms:	<ul style="list-style-type: none">• <i>Application for Waiver of Court Fees</i>• <i>Order for Waiver of Court Fees</i>
Purpose of the forms:	To ask the court to let you participate in a court case for free or at a reduced cost.
Types of cases the forms CAN be used for:	All civil cases. For example, divorce cases, family cases, eviction cases, small claims cases, foreclosure cases and lawsuits for injury or property damage. It can also be used in expungement and sealing of criminal cases.
Types of cases the forms CANNOT be used for:	All criminal, traffic, and juvenile justice cases. If you need to ask for a fee waiver in a criminal case, you can use the <i>Application for Waiver of Criminal Court Assessments</i> form found here: illinoiscourts.gov/Forms/approved/Circuit.asp
Special information or papers needed to complete the forms:	<ul style="list-style-type: none">• You will need to know your income and expenses information for the past 12 months. You also need to know the value of your belongings, including any real estate.• If you are filling this form out on behalf of a minor or incompetent adult, you will need that person's information.• If you get public benefits, you may want to bring current proof of eligibility and a benefits statement from the agency providing the benefit when you file your forms.• If you don't get public benefits, you may want to bring documents showing your income, value of belongings (including real estate) and expense information when you file your forms.
Statutes and rules covering the forms:	<ul style="list-style-type: none">• 735 ILCS 5/5-105 and 5/5-105.5• Illinois Supreme Court Rule 298
Where to find the forms and instruction sheet:	illinoiscourts.gov/Forms/approved/Circuit.asp
For more information:	Read the <i>How to Ask the Court to Participate in a Court Case for Free or at a Reduced Cost</i> instruction sheet that comes with these forms. You may also find more information, resources, and the location of your local county self help center at: illinoislegalaid.org/FeeWaiver .

HOW TO ASK THE JUDGE TO PARTICIPATE IN A COURT CASE FOR FREE OR AT A REDUCED COST

Who can ask the judge to participate in a court case for free or at a reduced cost?

Anyone who must pay a fee as part of a court case. You can ask for yourself, your minor child, or an incompetent adult, but not for anyone else.

How will I know if there is a fee?

The Circuit Clerk can tell you if there is a fee for filing a document with the court. Other fees might come up during the case. For example, the judge might tell you about a fee or the sheriff's department might tell you about a fee for delivering (serving) court papers.

What forms do I need to fill out to ask the judge to let me participate in a case for free or at a reduced cost?

- **Application for Waiver of Court Fees:** Is used to tell the judge whether you get any public benefits and your income and expense information so they can decide if you can participate in a court case for free or at a reduced cost.
- **Order for Waiver of Court Fees:** Is used by the judge to say your application is granted or denied.

Where can I find the forms I need?

You can find forms at:

illinoiscourts.gov/Forms/approved/.

Do I have to pay to file an *Application for Waiver of Court Fees*?

No, there is no cost for filing an *Application for Waiver of Court Fees*.

Is there a deadline for filing an *Application for Waiver of Court Fees*?

- No. You can file an *Application for Waiver of Court Fees* at any time during the court case.
- It might take the judge a couple of days to review your application and to decide whether you have to pay fees, so don't wait until the last minute.
- You are responsible for knowing if there are other deadlines to file documents.

How do I prove I cannot afford to pay court fees?

The judge may require you to prove the information in your *Application*. If you get public benefits you may want to bring proof of current eligibility and benefits statement from the agency providing the benefit.

Examples of public benefits are:

- Supplemental Security Income (SSI) (Not Social Security)
- Aid to the Aged, Blind and Disabled (AABD)
- Temporary Assistance to Needy Families (TANF)

- SNAP (Food Stamps)
- General Assistance (GA), Transitional Assistance, or State Children & Family Assistance

If you don't get public benefits, you may want to bring documents showing your income, value of belongings (for example, real estate), and expenses.

What happens if my *Application* is granted?

Depending upon your circumstances, the judge may order that:

- You may participate for free;
- You must pay 25% of any fee charged;
- You must pay 50% of any fee charged; OR
- You must pay 75% of any fee charged.

If my *Application* is granted, will I ever have to pay fees?

- If the judge grants your *Application* and later decides that the information you put in your *Application* was incorrect and you were ineligible, the judge can make you pay back any fees that were waived.
- If the court believes that your financial situation has changed and you are no longer eligible for a full or partial fee waiver, the court can hold a hearing to decide whether you are still eligible. If you are no longer eligible, you will have to pay future fees.
- If the court decides you do not have to pay all or some of the court fees and you win your case and get money from the other side, the court may make you use all or part of this money to pay the court fees.

When does my fee waiver expire?

It is good for one year. If you still need the fee waiver after it expires, you will need to file a new *Application*. However, this does not mean you have to pay back fees that were already waived.

What do I do after I fill out the *Application for Waiver of Court Fees* and *Order for Waiver of Court Fees*?

Step 1: File your *Application for Waiver of Court Fees* and *Order for Waiver of Court Fees* with the Circuit Clerk in the county where your court case was filed.

- You must electronically file (e-file) court documents unless (1) you are an inmate in a prison or jail and you do not have a lawyer, (2) you have a disability that keeps you from e-filing, or (3) you qualify for an exemption from e-filing.
 - You will qualify for an exemption if: (1) you do not have internet or computer access at home and it would be difficult for you to travel to a place where you could use a computer; or (2) you have a language barrier or low literacy (difficulty

- reading, writing, or speaking in English).
- Fill out a *Certification for Exemption from E-Filing* found here:
illinoiscourts.gov/Forms/approved/default.asp.
- To receive an exemption, file the original and 1 copy of your *Application for Waiver of Court Fees*, and the *Certification*, with the Circuit Clerk's office, in person or by mail.
- To e-file, create an account with an e-filing service provider.
 - Visit efile.illinoiscourts.gov/service-providers.htm to select a service provider. Some service providers are free while others charge a processing fee. For instructions on how to e-file for free with Odyssey eFileIL, see the self-help user guides here:
illinoiscourts.gov/CivilJustice/Resources/Self-Represented_Litigants/self-represented.asp
- If you do not have access to a computer or if you need help e-filing, take your form to the Circuit Clerk's office where you can use a public computer terminal to e-file your form.
 - You can bring your form on paper or saved on a flash drive.
 - The terminal will have a scanner and computer that you can use to e-file your form.

Step 2: Wait for a decision.

- The judge will review your *Application for Waiver of Court Fees* and decide whether you have to pay the court fees.
- The judge may need more information from you. The judge may want to have a hearing on your *Application*. The judge will notify you if you need to give more information or documents, or if you have to go to court.
- After the judge makes a decision, the judge will fill out the *Order for Waiver of Court Fees*. The *Order for Waiver of Court Fees* will say if you have to pay any court fees.
- The judge or the Circuit Clerk will tell you:
 - How you will get a copy of the *Order for Waiver of Court Fees*.
 - When you will get a copy of the *Order for Waiver of Court Fees*.
- If the judge decides you have to pay all or some of the court fees, you have to pay by the deadline set in the *Order for Waiver of Court Fees*. If you do not pay by the deadline, the judge may dismiss your case or find against you.

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY	ORDER FOR WAIVER OF COURT FEES	<i>For Court Use Only</i>
Instructions ▼	<div style="border-bottom: 1px solid black; margin-bottom: 10px;"> Plaintiff / Petitioner <i>(First, middle, last name)</i> </div> <div style="text-align: center; margin-bottom: 10px;"> V. </div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"> Defendant / Respondent <i>(First, middle, last name)</i> </div>	
Directly above, enter the name of the county where the case was filed.		
Enter the name of the person who started the lawsuit as Plaintiff/Petitioner.		
Enter the name of the person being sued as Defendant/Respondent.		
Enter the Case Number given by the Circuit Clerk or leave this blank if you do not have one.	<div style="border-bottom: 1px solid black; margin-bottom: 10px;"> Case Number </div>	

Enter your full name as "Applicant."

Applicant Name: _____
First
Middle
Last

DO NOT check any boxes or fill in any more blanks on this form. The judge will complete the rest of the form.

The Court having reviewed the *Application for Waiver of Court Fees* hereby finds:

1. The applicant **qualifies** for a **full (100%)** waiver of all fees, costs, and charges because *(check only one)*:
 - a. The applicant receives means-based government assistance under one or more of the following programs:
 - Supplemental Security Income (SSI) (Not Social Security)
 - Aid to the Aged, Blind and Disabled (AABD)
 - Temporary Assistance for Needy Families (TANF)
 - SNAP(Food Stamps)
 - General Assistance (GA), Transitional Assistance, or State Children and Family Assistance
 - OR**
 - b. The applicant's personal income is **125%** or less of the current poverty level as established by the U.S. Department of Health and Human Services and the Applicant's non-exempt assets under [735 ILCS 5/12-901](#) and [735 ILCS 5/12-1001](#) are such that the applicant is unable to pay the fees, costs, or charges;
 - OR**
 - c. Payments of fees, costs, and charges would result in substantial hardship to the applicant or his or her family.

2. The applicant **qualifies** for a **partial (75%, 50%, or 25%)** waiver of all fees, costs, and charges because the applicant's household income is *(check one)*:
 - more than **125%** but not greater than **150%** *(75% waived)*; OR
 - more than **150%** but not greater than **175%** *(50% waived)*; OR
 - more than **175%** but not greater than **200%** *(25% waived)*
 of the current poverty level as established by the US Department of Health and Human Services and the Applicant's non-exempt assets under [735 ILCS 5/12-901](#) and [735 ILCS 5/12-1001](#) are such that the applicant is unable

to pay the fees, costs, or charges.

- 3. The applicant must **provide additional information and attend a hearing** before the court decides if the applicant qualifies for a fee waiver.
- 4. The applicant **does not qualify** for a fee waiver because *(must state specific reason)*:

IT IS HEREBY ORDERED:

- A. *Application for Waiver of Court Fees* is **GRANTED**.
 - i. The applicant qualifies for a **full waiver**, and may participate in this case without payment of fees, costs, or charges.
OR
 - ii. The applicant qualifies for a **partial fee waiver** as follows *(check one)*:
 - 75%** of all fees, costs, and charges **are waived** *(and the applicant must pay 25% of all fees, costs, and charges)*.
 - 50%** of all fees, costs, and charges **are waived** *(and the applicant must pay 50% of all fees, costs, and charges)*.
 - 25%** of all fees, costs, and charges **are waived** *(and the applicant must pay 75% of all fees, costs, and charges)*.

Charges included in this waiver are: filing, service of process, publication, mediation, guardian ad litem, or any other court ordered fees listed in [735 ILCS 5/5-105\(a\)\(2\)\(1\)](#).

- The applicant must pay fees, costs, and charges currently due by: _____
Date
- OR
- Upon good cause shown, the applicant may make payments as follows *(describe deferral, installment plan, or other reasonable terms)*:

This order expires one year from the date of this order. The applicant may reapply before or after the expiration date.

- B. *Application for Waiver of Court Fees* is **SET FOR HEARING** on _____
Date
at _____ in courtroom: _____
Time
The applicant must bring the following documents: _____

- C. *Application for Waiver of Court Fees* is **DENIED**.
The applicant must pay all fees, costs, and charges currently due by: _____
Date

DO NOT complete this section. The judge will sign and date here.

ENTERED:

Judge _____ *Date*