



SUPPORT INFORMATION SHEET

To Be Impounded by the Circuit Clerk to
Protect Private Information
(CHILD SUPPORT AND MAINTENANCE)
IN THE STATE OF ILLINOIS, CIRCUIT COURT

COUNTY: _____
County Where You Are Filing the Case

PETITIONER: _____
Who started the case. First, Middle, and Last Name

RESPONDENT: _____
Who the case was filed against. First, Middle, and Last Name

IV-D Case Number
(if applicable)

Case Number



File this form with the Circuit Clerk. If you e-file this form, select "confidential" when uploading the form.



1. PETITIONER INFORMATION

a. Petitioner is the person:

☐ Paying support (Obligor)

☐ Receiving support (Obligee)

b. Name: _____
First, Middle, and Last Name

c. Address: _____
Street, Apt. # City State ZIP

d. Date of Birth: _____
Month, Date, and Year

e. Social Security Number: _____

f. Phone Number: _____

g. Petitioner is employed by: _____
Employer's name

Employer Address: _____
Street, Apt. # City State ZIP

Employer Phone Number: _____



2. RESPONDENT INFORMATION

a. Respondent is the person:

☐ Paying support (Obligor)

☐ Receiving support (Obligee)

b. Name: _____
First, Middle, and Last Name

c. Address: _____
Street, Apt. # City State ZIP

d. Date of Birth: _____
Month, Date, and Year

This form is approved by the Illinois Supreme Court and must be accepted in all Illinois Courts. Forms are free at ilcourts.info/forms.

e. Social Security Number: _____.

f. Phone Number: _____.

g. Respondent is employed by: _____.

Employer's name

Employer Address: _____.

Street, Apt. #

City

State

ZIP

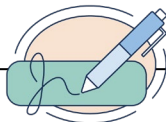
Employer Phone Number : _____



3. CHILDREN

List the names and birthdates for children who will be getting support. Leave this blank if no child support was ordered.

Child's Name <i>(first, middle, and last)</i>	Date of Birth
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	



This form was prepared by:

Your Signature /s/ _____ Print Your Name _____

Your Phone Number _____ Attorney Number (if any) _____

Your Email (if you have one) _____

Your Address _____

Street, Apt. #

City

State

Zip Code