

<div>STATE OF ILLINOIS, CIRCUIT COURT</div> <div>_____ COUNTY</div>		<div>EMERGENCY MOTION TO CLAIM EXEMPTION</div>	<div>For Court Use Only</div>
<div>Instructions ▼</div> <div>Enter above the county name where the <i>Citation to Discover Assets to Debtor's Bank</i> was filed.</div> <div>Fill in the rest of the information by copying it from the <i>Citation</i>.</div>	<div> <div>Plaintiff (First, middle, last name)</div> <div>v.</div> <div>Defendant (First, middle, last name)</div> <div>Respondent (Bank's name)</div> </div>		<div>Case Number</div>

In 2 , enter the name of your bank.
In 3 , check all that apply.

1. I am the debtor.
2. My accounts at _____ have been frozen.
Name of bank
3. My accounts contain money from the following sources: *(check all that apply)*
 - ☐ Social Security, SSI benefits, and disability
 - ☐ Pension and retirement benefits and refunds
 - ☐ Public assistance benefits
 - ☐ Child support
 - ☐ Unemployment compensation benefits
 - ☐ Workers' compensation benefits
 - ☐ Veterans' benefits
 - ☐ Circuit breaker property tax relief benefits
 - ☐ Any other source, up to \$4,000 ("wildcard exemption")
4. This money is exempt under these laws: [42 USC § 407\(a\)](#); [735 ILCS 5/12-1001](#); and [735 ILCS 5/12-1006](#).

In **5**, enter the amount of money you are claiming as exempt.

5. I claim \$ _____ as exempt.
Amount of money in account
- I ask for the following:
- Declare my funds to be exempt.
 - Order the bank to remove the hold on my accounts.
 - Dismiss the *Citation to Discover Assets to a Debtor's Bank*.
 - Grant any other relief that is fair.

Under the Code of Civil Procedure, [735 ILCS 5/1-109](#), making a statement on this form that you know to be false is perjury, a Class 3 Felony.

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.

I certify that everything in the *Emergency Motion to Claim Exemption* is true and correct.
I understand that making a false statement on this form is perjury and has penalties provided
by law under [735 ILCS 5/1-109](#).

/s/

Your Signature

Street Address

Your Name _____

City, State, ZIP

Telephone _____