

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)*

<input type="checkbox"/> My employment:	\$ _____	<input type="checkbox"/> Social Security (not SSI):	\$ _____
<input type="checkbox"/> Child support:	\$ _____	<input type="checkbox"/> Unemployment:	\$ _____
<input type="checkbox"/> Pension:	\$ _____		
<input type="checkbox"/> Money from other household members:			\$ _____
<input type="checkbox"/> Other <i>(list type and amount):</i>	_____		\$ _____
<input type="checkbox"/> 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)*

<input type="checkbox"/> My employment:	\$ _____	<input type="checkbox"/> Social Security (not SSI):	\$ _____
<input type="checkbox"/> Child support:	\$ _____	<input type="checkbox"/> Unemployment:	\$ _____
<input type="checkbox"/> Pension:	\$ _____		
<input type="checkbox"/> Money from other household members:			\$ _____
<input type="checkbox"/> Other <i>(list type and amount):</i>	_____		\$ _____
<input type="checkbox"/> 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)*

<input type="checkbox"/> Rent:	\$ _____	per month
<input type="checkbox"/> Home Mortgage:	\$ _____	per month
<input type="checkbox"/> Other Mortgage:	\$ _____	per month
<input type="checkbox"/> Utilities:	\$ _____	per month
<input type="checkbox"/> Food:	\$ _____	per month
<input type="checkbox"/> Medical:	\$ _____	per month
<input type="checkbox"/> Car Loan:	\$ _____	per month
<input type="checkbox"/> Childcare:	\$ _____	per month
<input type="checkbox"/> Child Support:	\$ _____	per month
<input type="checkbox"/> Other expenses not listed above <i>(list type and amount):</i>	_____	

\$ _____

☐ 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