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[Individual Home](#)

[Illinois Job Link](#)

Language **English** ▼

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Confirmation Page

Print

Your confirmation number ⓘ is 18411178.

Your claimant ID ⓘ is 6450369.

You have successfully submitted your claim to IDES on 06/02/2020 at 15:31 CST.

The effective date of your claim for unemployment is: 05/31/2020

After your claim is filed, IDES will send you a statement called a "UI Finding".

The "UI Finding" will provide you information regarding the effective date of your claim, the date you should certify, your base period wages and your weekly benefit amount and dependent allowance, if applicable.

Certifying for Benefits

To obtain benefits you must certify for them on a biweekly basis. Your "UI Finding" will inform you of your first date to certify.

You will not receive Unemployment Insurance benefits if you fail to certify. If you do not certify in a timely manner, your benefits may be denied or delayed. For more information regarding certifying for benefits, please return to the website and select the Individuals tab. Then select the link "Forms and Publications for Individuals" and select "UI Benefits Handbook".

Payment Options

Debit Card - A debit card will be mailed to you if you do not already have one or if you have not enrolled in direct deposit. Benefits for which you are determined eligible will be deposited to this card after you certify.

Direct Deposit - Your benefit payments can be deposited into your bank account automatically with Direct Deposit.

First Name: Aibek

Middle Initial:

Last Name: Zhumabekov

My Profile

Is your mailing address same as residential?

No

Is your mailing address a Post Office Box?

No

| | |
|---|--|
| Mailing Address: | 5431 N EAST RIVER RD APT 908 CHICAGO Cook , IL United States 60656-1077 (312) 532-7476 aibekzhv@gmail.com |
| Residential Address: | 6151 N Washtenaw Ave 3 Chicago Cook , IL, United States 60659 |
| Yes, I want to receive my 1099G electronically. | |
| I elect to have Federal Income Tax withheld from my gross Unemployment Insurance Benefit payments in the amount of 10%. | No |
| I elect to have State Income Tax withheld from my gross Unemployment Insurance Benefit payments in the amount of 4.95%. | No |
| Are you a U.S. citizen? | No |
| Are you authorized to work in the U.S.? | Yes |
| Alien Registration Number | A209371765 |
| When did you enter the U.S? | 02/06/2016 |
| Type of Alien Registration document | I-766 (Employment Authorization Card) |
| Name as shown on Alien Registration document | Aibek Zhumabekov |
| Date your registration expires? | 04/23/2021 |

| | |
|---|-----------------------------|
| Gender | Male |
| Race | Asian |
| Ethnic background | Prefer Not to Answer |
| What language do you prefer? | English |
| What is the highest level of education you have completed? | Bachelors Degree |
| Do you have a disability as defined in Section 7 of the 1973 Rehabilitation Act or the Americans with Disabilities Act of 1990? | No |
| Do you believe that you are a Seasonal Farmworker/Migrant after reading the definitions? | No |
| Are you the spouse or other family caregiver of a wounded, ill, or injured service member? | No |
| Are you a U.S. Armed Services Veteran? | No |
| Are you the spouse of a Veteran? | No |
| Do you wish to claim dependents? | No |

Employment

| | |
|------------------------|--|
| Most recent employer | Uber San Francisco San Francisco , California 94103 (866) 576-1039 State Work Last Performed - Illinois 06/02/2017 - 04/30/2020 455 days worked Typically worked 5 days in a week 1 weeks earned at least \$330 Laid-Off (Lack of Work) |
| Most recent occupation | 53 - Transportation/Material Moving |

Occupation

| | |
|---|---------------------------|
| Your deferred occupation | Work Hours reduced |
| Do you have a definite Return to Work date? | No |
| Please describe your most recent job title. | Uber Driver |

Income and Training

| | |
|---|----------------|
| Total Gross Wages earned since 05/31/2020. | \$ 0.00 |
| Have you been self-employed or an independent contractor since | No |
| Have you refused any offers of work since | No |
| Are you currently attending school or enrolled in a training program? | No |

| | |
|---|-------------------|
| Are you receiving or have you applied for a pension or any retirement pay? | No |
| Are you receiving or have you applied for Trade Act Benefits? | No |
| Are you receiving or have you applied for Workers' Compensation? | No |
| Are you receiving or will you receive plant shut down pay? | No |
| Have you or will you receive holiday pay since 05/31/2020? | No |
| Are you receiving or have you applied for Railroad Unemployment? | No |
| Have you filed an unemployment insurance claim in another state since 06/02/2019? | Yes |
| Against which state(s) have you filed an Unemployment Insurance claim? | California |

| | |
|--|-------------------------------|
| Potential WBA | |
| Estimated Weekly Benefit Amount \$0.00 | Estimated Dependent Allowance |
| \$0.00 | |
| Your Potential Weekly Benefit Amount and Dependent Allowance are estimates. The estimates are based on wages reported by Illinois employers for whom you indicated you worked. | |

If you don't receive the UI Finding within two weeks from the date you filed this claim, please contact Claimant Services Center at (800)244-5631.

If you were instructed during the application process to mail or fax documents to IDES, please do so immediately. Fax documents to (217) 557-4913. Failure to mail or fax documents may delay your benefits.

For DD-214's only, fax to (630) 645-3723.

For further information, please contact Claimant Services Center at (800)244-5631.

TDD/TTY Assistance

If you are hearing impaired and need additional assistance you may contact IDES. Agents are equipped with NexTalk software. To contact the agency, please call Claimant Services Center at (866) 488-4016 between 8:30 am and 5:00 pm, Monday through Friday, excluding state holidays.

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