

This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois courts.

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY	ORDER FOR WAIVER OF COURT FEES	<i>For Court Use Only</i>
Instructions ▼ Enter above the county name 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.	_____ Plaintiff / Petitioner (<i>First, middle, last name</i>) v. _____ Defendant / Respondent (<i>First, middle, last name</i>)	_____ Case Number

Enter your full name as "Applicant."

Applicant Name: _____
First Middle Last

DO NOT check any more boxes or fill in any more blanks on this form. The Judge will decide if your *Application for Waiver of Court Fees* is granted or denied and complete the rest of this form.

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

- The applicant **qualifies** for a fee waiver because (*check one*):
 - The applicant receives assistance under one or more of the following programs: Supplemental Security Income (SSI); Aid to the Aged, Blind and Disabled (AABD); Temporary Assistance for Needy Families (TANF); Food Stamps (SNAP); General Assistance; Transitional Assistance; or State Children and Family Assistance; **OR**
 - The applicant's household income is 125% or less than the current poverty level as established by the U.S. Department of Health and Human Services; **OR**
 - Payments of fees, costs, and charges would result in substantial hardship to the applicant or his or her family.
- The applicant **does not qualify** for a fee waiver because (*must state specific reason*):

IT IS HEREBY ORDERED:

- Application for Waiver of Court Fees* is **GRANTED**. The applicant may participate in this case without payment of fees, costs, or charges including: filing, service of process, publication, mediation, guardian ad litem, or any other court ordered fees as listed in 735 ILCS 5/5-105(a)(1).
- Application for Waiver of Court Fees* is **DENIED** and:
 - Applicant must pay all applicable fees, costs, or charges by: _____ **OR**
Date
 - Applicant must pay all applicable fees, costs or charges as follows (*describe payment plan*):

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

ENTERED:

Judge Date

This form shall not be modified. It may be supplemented with additional materials.