

<p>Instructions ▼</p> <p>Check the box to the right if your appeal involves custody, visitation, or removal of a child.</p> <p>Enter the Appellate Court case number.</p> <p>Just below "In the Appellate Court of Illinois," enter the number of the appellate district where the appeal was filed.</p> <p>If the case name in the trial court began with "In re" (for example, "In re Marriage of Jones"), enter that name. Below that, enter the names of the parties as they appeared in the trial court, and check the correct boxes to show which party filed the appeal ("appellant") and which party is responding to the appeal ("appellee").</p> <p>To the far right, enter the trial court county, trial court case number, and trial judge's name.</p>	<p><input type="checkbox"/> THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER RULE 311(a).</p> <p style="text-align: center;">Appellate Case No.: _____</p> <p style="text-align: center;">IN THE APPELLATE COURT OF ILLINOIS</p> <p style="text-align: center;">_____ District</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none; padding: 5px;"> <p>In re _____</p> <p>_____</p> <p>Plaintiff/Petitioner in the trial court (<i>First, middle, last names</i>)</p> <p><input type="checkbox"/> Appellant <input type="checkbox"/> Appellee</p> <p>v.</p> <p>_____</p> <p>Defendant/Respondent in the trial court (<i>First, middle, last names</i>)</p> <p><input type="checkbox"/> Appellant <input type="checkbox"/> Appellee</p> </td> <td style="width: 40%; border: none; padding: 5px;"> <p>Appeal from the Circuit Court of _____ County</p> <p>Trial Court Case No.: _____</p> <p>Honorable _____</p> <p>Judge, Presiding</p> </td> </tr> </table>	<p>In re _____</p> <p>_____</p> <p>Plaintiff/Petitioner in the trial court (<i>First, middle, last names</i>)</p> <p><input type="checkbox"/> Appellant <input type="checkbox"/> Appellee</p> <p>v.</p> <p>_____</p> <p>Defendant/Respondent in the trial court (<i>First, middle, last names</i>)</p> <p><input type="checkbox"/> Appellant <input type="checkbox"/> Appellee</p>	<p>Appeal from the Circuit Court of _____ County</p> <p>Trial Court Case No.: _____</p> <p>Honorable _____</p> <p>Judge, Presiding</p>
<p>In re _____</p> <p>_____</p> <p>Plaintiff/Petitioner in the trial court (<i>First, middle, last names</i>)</p> <p><input type="checkbox"/> Appellant <input type="checkbox"/> Appellee</p> <p>v.</p> <p>_____</p> <p>Defendant/Respondent in the trial court (<i>First, middle, last names</i>)</p> <p><input type="checkbox"/> Appellant <input type="checkbox"/> Appellee</p>	<p>Appeal from the Circuit Court of _____ County</p> <p>Trial Court Case No.: _____</p> <p>Honorable _____</p> <p>Judge, Presiding</p>		

APPLICATION FOR WAIVER OF COURT FEES (APPELLATE COURT)

<p>In 1a, enter your full name. If you are completing this form on behalf of a minor or an incompetent adult, provide that person's information.</p>
<p>In 1b, only enter the year you were born. DO NOT enter your entire date of birth.</p>
<p>In 1c, enter your complete current address.</p>
<p>In 2, if you are currently incarcerated, attach a copy of your inmate trust fund ledger for the last 6 months or your <i>Application</i> will be rejected.</p>

1. I am providing the following information about myself:
 - a. Name: _____

First
Middle
Last
 - b. Year of Birth: _____
 - c. Street Address: _____
 City, State, ZIP: _____
 - d. I cannot afford to pay the court fees in this case.
 - e. Email address: _____ Telephone number: _____

2. I am currently incarcerated. Yes No If yes, inmate I.D. # _____
If yes, I am attaching a copy of my inmate trust fund ledger for the last six (6) months.

****If you answered "Yes" in section 2, skip section 3, 4, and 5 and sign below.****

Enter the Case Number given by the Appellate Court Clerk: _____

- 2nd vehicle worth: \$ _____ The 2nd vehicle is paid Yes No
 Other (list items and value): _____ \$ _____
 None of the above

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.

I certify that everything in the *Application for Waiver of Court Fees (Appellate Court)* 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](#).

The person who filled out this form must sign it. If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign by hand and print your name.

/s/ _____
Your Signature

Street Address

Print Your Name

City, State, ZIP

Relationship to Minor or Incompetent Adult (if applicable)

Telephone

If you are filling out this form for a minor or an incompetent adult, state your relationship.

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