

# **This food pantry is required by the Illinois Department of Human Services to collect a verbal attestation of income eligibility from households.**

Each household must state whether or not they have a monthly gross income at or below 300% of the Federal Poverty Level based on household size.

| Household Size                                                                   | Monthly Income |
|----------------------------------------------------------------------------------|----------------|
| 1                                                                                | \$3,990        |
| 2                                                                                | \$5,410        |
| 3                                                                                | \$6,830        |
| 4                                                                                | \$8,250        |
| 5                                                                                | \$9,670        |
| 6                                                                                | \$11,090       |
| 7                                                                                | \$12,510       |
| 8                                                                                | \$13,930       |
| 9                                                                                | \$15,350       |
| 10                                                                               | \$16,770       |
| For households with more than 10 persons, add \$1,340 for each additional person |                |

**You are not required to provide proof of income or household size.**

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