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Excessive Medical Bills/Insurance Premiums Paid in 2021, 2022 or 2023

form will be processed.

Please note, if you have filed a Schedule A with your 2021 or 2022 taxes we are unable to process an additional review of your FAFSA info. You have already received a benefit for these expenses.

• Copy of all PAID receipts for medical/dental expenses, (itemized statements of payments made to pharmacies, doctors/dentists, medical equipment providers and/or hospitals) from those providers, or a copy of an IRS Schedule A if filed with federal taxes for 2021 or 2022.

• Please note: You may be required to submit copies of your 2020, 2021 and 2022 Federal Tax Transcripts before this

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	• In	clude	appro	opriate	doc	umenta	ation ((conta	act c	our c	office	if yo	u are	un	sure c	of wh	at ty	pe of	doc	umer	ntati	on to	o pro	vide)
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STUDENT SIGNATURE

PARENT / SPOUSE STUDENT SIGNATURE

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Student ID (E Number)	Last Name	Firs	t Nan	ne	
		OR - 2023 ESTIMAT			
PLEASE SELECT THE YEAR FOR WHI	ICH YOU ARE PROVIDING INFOR	MATION (You may use only ONE	year.):	2022	□ 2023
Provide actual income for 2022 - O through Dec. 31, 2023). Be sure to are a Dependent student enter information for yourself and spouse	use amounts for the year, rathe o for your parents. If you are an I	r than monthly amounts. If you	PA	STUDENT / RENT 1 NAME:	SPOUSE / PARENT 2 NAME:
Taxed Income:					
Total Wages (Provide copies of your 20	022 W-2 form(s) - OR- most recent p	pay stub for 2023)	\$		\$
Unemployment Benefits			\$		\$
Interest/Dividend Income			\$		\$
Business/Farm Income			\$		\$
Pension/Annuity/Retirement Benefits			\$		\$
Taxable Social Security Benefits (do no	ot include untaxed amounts)		\$		\$
Alimony/Spousal Support			\$		\$
Insurance Benefits			\$		\$
Military or Clergy Housing/Food Allow	vances		\$		\$
Disability Benefits			\$		\$
Severance Pay			\$		\$
Other (Such as Rent Received or Capit	al Gain, found on federal tax return) Please list sources:	\$		\$
Child Support PAID in 2022 - OR -	WILL PAY in 2023		\$		\$
If you report child support paid or to		and ages of the children for whoms		t is paid.	
Alimony PAID in 2022 - OR - WILL F	'AY in 2023		\$		\$
Untaxed Income:			1		1
Child Support Received: (Include total		stimated amounts for 2023)	\$		\$
Pension/Annuity/Retirement Benefit			\$		\$
Retirement/Disability Benefits Rece	ived: (Do NOT include untaxed So	cial Security Disability Income-SSDI)	1		\$
Veteran Benefits			\$		\$
Payments to Tax Deferred Pension/	Savings Plans (paid directly or wit	thheld from earnings)	\$		\$
Deductible IRA/Keough			\$		\$
Untaxed Social Security Benefits (D		curity Disability Income-SSDI)	\$		\$
Other untaxed income not elsewhe			\$		\$
Complete information regarding		EHOLD MEMBERS ing yourself, whom you will suppo	rt bet	ween July 1, 2023	3 and June 30, 2024.
Name	Age	Relationship to Studen	t		Vill Attend College, llege Name
		Student		Eastern Illinois U	niversity
			_	<u> </u>	
		nold, attach a list of the additiona			
I certify that, to the best of my know					
follow-up procedures to verify data	mat i nave submitted and/or has	been submitted on my bendif. Al	i iiiiOFI	mation will remai	n comidential.

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DATE

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