**Diversion Financial Form**

In Consideration of the Diversion fee, please complete the following:

Youth's Name:  

IJOS #:  

Does the Youth/Family receive assistance for:

- Medicaid  
- School Lunch  
- Rent  
- Food  
- Other:  

Youth in H&W Custody: ☐ Yes

Please indicate where your family fits on the chart below; circle or list below the appropriate number of household members and estimated annual income:

<table>
<thead>
<tr>
<th>Number of Persons in Household</th>
<th>$13,590</th>
<th>$18,075</th>
<th>$18,754</th>
<th>$20,385</th>
<th>$27,180</th>
<th>$40,770</th>
<th>$54,360</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$18,310</td>
<td>$24,352</td>
<td>$25,268</td>
<td>$27,465</td>
<td>$36,620</td>
<td>$43,500</td>
<td>$73,240</td>
</tr>
<tr>
<td>2</td>
<td>$23,030</td>
<td>$30,630</td>
<td>$31,781</td>
<td>$34,545</td>
<td>$46,060</td>
<td>$69,090</td>
<td>$92,120</td>
</tr>
<tr>
<td>3</td>
<td>$27,750</td>
<td>$36,908</td>
<td>$38,295</td>
<td>$41,625</td>
<td>$55,500</td>
<td>$83,250</td>
<td>$111,000</td>
</tr>
<tr>
<td>4</td>
<td>$32,470</td>
<td>$43,185</td>
<td>$44,809</td>
<td>$48,705</td>
<td>$64,940</td>
<td>$97,410</td>
<td>$129,880</td>
</tr>
<tr>
<td>5</td>
<td>$37,190</td>
<td>$49,463</td>
<td>$51,322</td>
<td>$55,785</td>
<td>$74,380</td>
<td>$111,570</td>
<td>$148,760</td>
</tr>
<tr>
<td>6</td>
<td>$41,910</td>
<td>$55,740</td>
<td>$57,836</td>
<td>$62,865</td>
<td>$83,820</td>
<td>$125,730</td>
<td>$167,640</td>
</tr>
<tr>
<td>7</td>
<td>$46,630</td>
<td>$62,018</td>
<td>$64,349</td>
<td>$69,945</td>
<td>$93,260</td>
<td>$139,890</td>
<td>$186,520</td>
</tr>
</tbody>
</table>

If your annual income or household number is not listed on the chart, please fill in the blanks below:

Estimated annual income:  

Number of Household Members:  

**For Diversion Supervisor Only:**

☐ Fee Waived  

Fee reduced $  

Signature/Date:  

**For Diversion Officer Only:**

☐ Field Note  

☐ Blue Ribbon  

☐ Phone Call  

☐ Scanned Agreement