

**OHIO PUBLIC DEFENDER  
INDIGENT CLIENT ELIGIBILITY GUIDELINES  
2017**

**ALL FIGURES BASED ON GROSS INCOME.**

Household Size	100%	Annual Income		Monthly Income		Bi-Weekly Income		Weekly Income	
		125%	187.5%	125%	187.5%	125%	187.5%	125%	187.5%
1	\$ 12,060	\$ 15,075	\$ 22,613	\$ 1,256	\$ 1,884	\$ 580	\$ 870	\$ 290	\$ 435
2	\$ 16,240	\$ 20,300	\$ 30,450	\$ 1,691	\$ 2,538	\$ 781	\$ 1,171	\$ 390	\$ 586
3	\$ 20,420	\$ 25,525	\$ 38,288	\$ 2,128	\$ 3,191	\$ 982	\$ 1,473	\$ 491	\$ 736
4	\$ 24,600	\$ 30,750	\$ 46,125	\$ 2,563	\$ 3,844	\$ 1,183	\$ 1,774	\$ 591	\$ 887
5	\$ 28,780	\$ 35,975	\$ 53,963	\$ 2,998	\$ 4,497	\$ 1,384	\$ 2,075	\$ 692	\$ 1,038
6	\$ 32,960	\$ 41,200	\$ 61,800	\$ 3,434	\$ 5,150	\$ 1,585	\$ 2,377	\$ 792	\$ 1,188
7	\$ 37,140	\$ 46,425	\$ 69,638	\$ 3,869	\$ 5,803	\$ 1,786	\$ 2,678	\$ 893	\$ 1,339
8	\$ 41,320	\$ 51,650	\$ 77,475	\$ 4,304	\$ 6,456	\$ 1,987	\$ 2,980	\$ 993	\$ 1,490
each additional	\$ 4,180	\$ 5,225	\$ 7,838	\$ 435	\$ 653	\$ 201	\$ 301	\$ 100	\$ 151

Based on poverty guidelines determined by the U.S. Dept. of Health & Human Services

SOURCE: <https://www.federalregister.gov/documents/2017/01/31/2017-02076/annual-update-of-the-hhs-poverty-guidelines>