This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts.

STATE OF ILLINOIS, CIRCUIT COURT COUNTY		MOTION	For Court Use Only							
Instructions ▼ Directly above, enter the name of the county where the case was										
filed. Enter the name of the person who started the lawsuit as Plaintiff/Petitioner.		ioner (First, middle, last name)								
Enter the name of the person being sued as Defendant/Respondent.	V.	v.								
Enter the Case Number given by the Circuit Clerk.	Defendant / Re	espondent (First, middle, last name)	Case Number							
In 1, check if you are the Plaintiff/Petitioner or Defendant/Respondent. In 2, enter what you are asking the court for with this <i>Motion</i> . In the lines write what you are asking the court to do, and the reasons why the judge should agree with you.	1. Motion by 2. Motion for		Respondent							

				Enter the Cas	se Number g	ven by the Circuit	Clerk:			
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		ent or	this	ything in the <i>Mot</i> form is perjury a	tion is true	and correct.	l understa ded by lav		_	
Class 3 Felony. If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.	Print Yo	our Nan				City, State	, ZIP			
Enter your complete current address and telephone number.	Telepho		E DE	ELIVERY						
In 1a, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.		sent thi	s dod	cument:						
In 1b , check the box to show how you sent the document, and fill in any other information required on the blank lines.			ress: ail add	First Street, Apt # dress:		Middle	City _	Last	State	ZIP
CAUTION: If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court	b.	Ву:		Personal hand d Regular, First-Cl Address of Post C Third-party comm	lass Mail,	ilbox			paid at:	
document.				Name (for example The court's elect service provider Email (not through Mail from a prison	tronic filing (EFSP) th an EFM o	manager (EF		oproved el	lectronic	filing
In c , fill in the date and time that you sent the document.	C.	On: At:	Date	□ a		p.m.				

In 2, if you sent the

document to more than 1 party or lawyer, fill in a, b, and c. Otherwise leave 2 blank.

Middle

Last

State

ZIP

City

I sent this document:

First

Street, Apt #

Name:

Address:

Email address:

a. To:

		b.	Ву:		Personal hand d Regular, First-Cl	-	ut into the U	.S. Mail with	n postage paid a	t:	
					Address of Post O Third-party comm			very paid fo	r at:		
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		C.	On: At:	Dat	□ a		o.m.				
In 3, if you sent the document to more than 2 parties or lawyers, fill in a, b, and c. Otherwise leave 3	3.	l se	To:		cument:						
blank.			Nam Addr Ema	ess:	First Street, Apt # dress:		Middle	City	Last State		ZIP
		b.	Ву:		Personal hand d Regular, First-Cl	-	ut into the U	.S. Mail with	ı postage paid a	t:	
					Address of Post O Third-party comr			very paid fo	r at:		
					Name (for example, FedEx or UPS) and office address The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP) Email (not through an EFM or EFSP) Mail from a prison or jail at:						
		C.	On:	Dat	Name of prison or	jail					
If you sent your document to more than 3 parties or lawyers, check the box and file the <i>Additional Proof of Delivery</i> form with this form.		l ha	At:	Tim	□ a		o.m. <i>Delivery</i> form				
torm.											

Enter the Case Number given by the Circuit Clerk: ___

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.	a false statement on this form is per 735 ILCS 5/1-109.	f of Delivery is true and correct. I understand that making rjury and has penalties provided by law under
If you are completing this form on a	Your Signature	Street Address
computer, sign your name by typing it. If you are completing it by hand, sign and print	Print Your Name	City, State, ZIP

Telephone

your name.

Enter the Case Number given by the Circuit Clerk: _