THE SUPRISON	APPEARANCE (CIVIL)	
STATE OF ILLINOIS AUG. 25 1818	IN THE STATE OF ILLINOIS, CIRCUIT COURT	
Social	This is my official notice that I am participating in this case.	
(	COUNTY:County Where You Are Filing the Case	
	Enter the case information as it appears on your other court documents.	
	PLAINTIFF/PETITIONER OR IN RE:	
'	Who started the case. First, Middle, and Last Name, or Business Name	
[	DEFENDANTS/RESPONDENTS: Who the case was filed against.	Case Number
		Case Number
	First Middle and Last Names of Dusiness Names	
	First, Middle, and Last Name, or Business Name	
) If your	want to request a trial with a judge and a jury (jury trial), you will also need to <b>fill</b>	out and file a consucto
The <b>de</b>	ant a trial with a judge only (bench trial), do <b>not</b> file the separate <i>Jury Request</i> for <b>eadline</b> for filing a <i>Jury Request</i> is different depending on the type of case and you ff, usually you must file a <i>Jury Request</i> at the same time that you file the case. If y	r situation. If you are the
usually	you must file a Jury Request at the same time as your Appearance.	·
4 11	AAAF	
	<b>AME &amp; INFORMATION</b> you do not have a lawyer, enter your information below to tell the court how to ad	ldress you. If you are a
	wyer entering an appearance for a client, enter your client's information below.	aress you. If you are a
	Name:	
		Name
	Pronouns (Optional):	
	☐ He/Him ☐ She/Her ☐ They/Them ☐ Other:	
	Prefix (Optional):	
	Mr. Ms. Mrs. Other:	
	PPEARANCE	
Che	ck only one box.	
	I do not have a lawyer and I am entering my own appearance in this case. With	th this <i>Appearance</i>
	form, I am telling the court that I am participating in this case.	
•	OR -	
	I am a lawyer entering my appearance for a client in this case:	

Attorney or Firm Name

Case Number:
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SIGN			
Under <u>Illinois Supreme Court Rule 137</u> , your signature	means that you:		
1) read the document, 2) believe it is true and correct,	and 3) are not filing it to cause delay	or for ar	nother bad reason.
If you are filling out this form online, sign your name b print your name.	y typing it. If you are filling out this fo	orm by ha	and, sign and
Your Signature /s/	Print Your Name		
Your Address			
Street, Apt. #		State	Zip Code
Your Phone Number	Kttorney Number (if any)		
Your Email (if you have one)			
Be sure to <b>check your email every day</b> so you do not rother parties.	miss important information, court da	tes, or do	ocuments from

## 3. PROOF OF DELIVERY

Fill out the information below to show how you are sending this document to the other people in the case. If a

Name:			
First	Middle	Last Name	
Address:			
Street, Apt. #	City	State	Zip Code
Email Address:			
: ☐ Electronically to the email addres	c in <b>3a</b> ·		
$\square$ By email (not through an EF	SP).		
Using an approved electroni	ic filing service provider (I	EECD)	
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		Case I	Number:	
<ul><li>b.</li></ul>	s to additional people			
☐ I am sending these documents to	an additional nerson r	not listed in 3a:		
_	·	iot listed iii <b>sa.</b>		
Name:	 Middle	 Last Name		
Address:				
Street, Apt. #	City	State	Zip Code	
Email Address:				
By: Electronically to the email address in By email (not through an EFSP) Using an approved electronic f		EFSP).		
☐ I or the person I am sending the doc ☐ Mail or third-party carrier to the	e address in <b>3b</b> , with p	ostage or delivery char	ge prepaid.	document by:
Location of mailbox or third-par	ty carrier: City			 State
Personal hand delivery at this ac NOTE: You can only deliver to the party,	ddress:	r 13 at party's residence, par	rty's lawyer, or p	arty's lawyer's office
	. #, City, State, and Zip Cod			
Mail to the address in <b>3b</b> , from		e of Prison or Jail		
This document will be sent on: Date:		-		
	Month, Day, Year		de AM or PM	
I am sending the document to more t	han 2 people and hav	e completed an <i>Additio</i>	nal Proof of D	elivery form.
SIGN				
Under 735 ILCS 5/1-109, your signature m	eans that you:			
1) certify that everything in this document this form is perjury and has penalties prov	is true and correct, a	nd 2) understand that r	making a false	statement on
If you are filling out this form online, sign print your name.	your name by typing if	. If you are filling out th	nis form by ha	ınd, sign and
Your Signature /s/	Print Your N	lame		
Your Address				
Street, Apt. #	City		State	Zip Code
Your Phone Number	Attorney	Number (if any)		
Your Email (if you have one)				
Be sure to <b>check your email every day</b> so other parties.			t dates, or do	cuments from

Case Number:	



## **NEXT STEP FOR PERSON FILLING OUT THIS FORM:**

After you fill out your forms, file them with the Circuit Clerk's office in the county where your case is taking place. Then, send your forms to the other people in the case. Find your Circuit Clerk: <a href="illourts.info/CircuitClerks">ilcourts.info/CircuitClerks</a>.



Learn more about each step in the process and how to file in our Instructions: ilcourts.info/appearance-instructions.

## **NEXT STEP FOR PERSON RECEIVING THIS DOCUMENT:**

For more information about going to court including how to fill out and file forms, call or text **Illinois Court Help** at 833-411-1121 or go to <u>ilcourthelp.gov</u>.

If there are any words or terms that you do not understand, please **visit Illinois Legal Aid Online** at <u>ilao.info/glossary</u>. You may also find more information, resources, and the location of your local legal self-help center at: <u>ilao.info/lshc-directory</u>.