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		NOTICE OF COURT DATE FOR MOTION TO VACATE & EXPUNGE ELIGIBLE CANNABIS CONVICTIONS		For Court Use C	inly
Ŧ		CANNABIS	CONVICTIONS		
Instructions ▼ Directly above, enter the name of county where you will file the <i>Motion</i> .	Request of:				
Enter your name, birth date, race, and gender. List any other names you used when	Your name (First, middle, last name)			
arrested on the cases listed on this form.	Other names used in these cases				
If the Circuit Clerk gave you a new case number, enter it to the right.	Date of birth	Race	Gender		er (if the Circuit a new number)
Enter the number for all eligible cannabis convictions on your criminal record in this county.	Case Number	ers of all Eligible Can	nabis Convictions on yo	eur Record in thi	s County:
	_	ted additional cases on & Expunge Eligible Can	the attached <i>Additional N</i>	lotice of Court Da	ate for Motion to
In 1a, enter the date and time of your hearing. The Circuit Clerk will give you the date and time of the hearing	 Hearing Information I filed a Motion to Vacate & Expunge Eligible Cannabis Convictions with the court. The hearing for the Motion I filed is scheduled for: 				
when you file your Motion. In 1b, enter the address	a. Date:		Time:		☐ p.m.
of the court and court room number for the hearing.	b. Address Courtroo	Street	City	State	ZIP
Under the Code of Civil Procedure, 735 ILCS 5/1-109, making a statement on this form that you know to be false is	I certify that everything in the <i>Notice of Motion to Vacate & Expunge Eligible Cannabis Convictions</i> is true and correct. I understand that making a false statement on this form is Perjury and has penalties provided by law under <u>735 ILCS 5/1-109</u> .				
perjury, a Class 3 Felony. 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 Your Name	;	City, State, ZIP		
Enter your complete address, telephone	Telephone		Email		
number, and email address, if you have			IAIL: You should use an emai ot check your email every day,		

one. of court dates, or documents from other parties.

	Enter the Ca	ase Number given by the Circuit Clerk:				
In 2, enter the State's Attorney office that prosecuted your cases. This contact	2. To: County Name	County State's Attorney				
information is publicly available online or from your county Circuit Clerk at: illinoiscourts.gov/court s/circuit-court/circuit-court-clerks/.	Street Address 3. I have filed a Motion to Vaca	City State ZIP				
In 3, enter the name of the county where you are filing your <i>Motion</i> .	3. I have filed a Motion to Vacate & Expunge Eligible Cannabis Convictions with the Circuit Clerk of County, Illinois. County Name					
In 4, check the box if you have or are getting a fee waiver.	4. I am seeking a fee waiver under Supreme Court Rule 298, or have attached an <i>Order</i> waiving my filing and State Police fees.					
	listed.	copy of this <i>Notice</i> and the <i>Motion</i> to the county State's Attorney				
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.	Prepared by: Street Address: City, State, ZIP: Phone Number:	Date				
	CERTIFICATE OF MAILING					
DO NOT fill out this section. The Circuit Clerk will sign and mail it.	The undersigned certifies that the above <i>Notice</i> and attached documents were placed in the U.S. mail with first class postage prepaid to the State's Attorney listed above.					
	Signature of Circuit Clerk	Name of Deputy Clerk				