STATE OF ILLINOIS

| | IN THE CIRCUIT COURT OF | | COUNTY |
|------------|-------------------------|---------------|--------|
| | | T | |
| Petitioner | | | |
| AND | | Case Number | |
| Responder | nt | Case Nulliber | |

MOTION TO MODIFY CHILD SUPPORT

| Respectfully | submitte | d, | |
|--------------|----------|----|--|

CERTIFICATION

Under 735 ILCS 5/1-109, my signature means that:

- 1) Everything in this document is true and correct, or I have been informed or I believe it to be true and correct, and
- 2) I understand that making a false statement on this form is perjury and has penalties provided by law.

| Signature | Name | |
|-----------------------|--|--|
| Phone | Email | |
| Address | ddress because disclosing my address would put me or | |
| my household at risk. | daless besides disclosing my address wedia pat me or | |

| address, or I am sendir Street, A By (check Perso You car Mail c Locati | all that apply): nal hand delivery. n only deliver to the perso or third-party carrier on of mailbox or thi rom a prison or jail: | r (FedEx, UPS, etc.) to the ird-party carrier: Addr | ess or Intersection ison or Jail Tir | e, with posta | ge or delivery pre State |
|--|---|--|---|------------------|---|
| address, or I am sendir Street, A By (check Perso You can Mail o | all that apply): nal hand delivery. nonly deliver to the person third-party carrier on of mailbox or thi | on, person's family member (FedEx, UPS, etc.) to tl ird-party carrier: Addr | over 13 at person's resident ne address listed above ress or Intersection | e, with posta | vyer, or the lawyer's o ge or delivery pre |
| address, or I am sendir Street, A By (check Perso You can Mail o | all that apply): nal hand delivery. nonly deliver to the person third-party carrier on of mailbox or thi | on, person's family member (FedEx, UPS, etc.) to tl ird-party carrier: Addr | over 13 at person's resident ne address listed above | e, with posta | vyer, or the lawyer's o ge or delivery pre |
| address, or I am sendir Street, A By (check Perso You can | all that apply): nal hand delivery. n only deliver to the person or third-party carrier | on, person's family member (FedEx, UPS, etc.) to tl ird-party carrier: | over 13 at person's resident ne address listed above | e, with posta | vyer, or the lawyer's o ge or delivery pre |
| address, or I am sendir Street, A By (check Perso | all that apply): nal hand delivery. nonly deliver to the perso | on, person's family member | over 13 at person's resident | | vyer, or the lawyer's o |
| address, or I am sendir Street, A By (check | <i>all that apply):</i> nal hand delivery. | · | | ce, person's lav | · |
| address, or address, or I am sendir Street, A By (check | all that apply): | City | State | | Zip Code |
| address, or I am sendir | • | City | State | | Zip Code |
| address, or | | | | | |
| address, or | ng the documents to | this address: | | | |
| TII CONMINA AAA | if you have permissi | ion from the judge, you | u may send documents | • | |
| | | | through an EFSP) if you r the person you are se | | |
| ☐ Through ar | approved e-filing v | vebsite (EFSP) to this e | mail address: | | |
| _ | | | | | _ |
| | the documents: | | | | |
| To: | or Law Firm Name | | | | |
| _ | Documents | | | | |
| | | | | | |
| - | | y and the following co | 3 / | ients to. | |
| • | • • • | • | uments to their lawye i are sending your docum | - | rm with the |
| • | • | | ents to the other peopl | e in the case | e under Rule <u>11</u> . |
| OOE (EVD) / | ANATION) OF D | | unie, ui business Name | | |
| | | First, Middle, and Last N | ama or Pusiness Name | | |
| Who the case v | vas filed against. | | | | Case Hallisel |
| DEFENDAN | S/RESPONDENTS: | | | | Case Number |
| Who started th | e case. | First, Middle, and Last I | Name, or Business Name | | |
| PLAINTIFF/F | PETITIONER OR IN R | | | | |
| | | rs on your other court docun | | | |
| | County Where You Are | Filing the Case | | | |
| COUNTY: _ | | | | | |
| COUNTY: _ | s are judge now und WII | en you will send documents | to the other people in the co | ase. | |
| This tel | | IS, CIRCUIT COURT | | | |

| case number | Case Number | | | | |
|-------------|-------------|--|--|--|--|
|-------------|-------------|--|--|--|--|



SIGN

Under 735 ILCS 5/1-109, my signature means that:

- 1) Everything in this document is true and correct, or I have been informed or I believe it to be true and correct, and
- 2) I understand that making a false statement on this form is perjury and has penalties provided by law.

| If you are filling out this form online, sign | your name by typing it. If you are filling out th | is form by hand, sign an | nd print your name. |
|---|---|--------------------------|---------------------|
| Signature <u>/s/</u> | Print Name | | |
| ☐ I am completing this form for my | self | | |
| Phone Number | Email (if you have one) | | |
| Address | | | |
| Street, Apt. # | City | State | Zip Code |
| Be sure to check your email every day so | you do not miss important information, court | dates, or documents fr | om other parties. |
| ☐ I am a lawyer completing this for | m on behalf of a client (Client name): | | |
| Lawyer Name | Attorney Nu | mber | |
| Lawyer Phone Number | Law Firm | | |
| Lawyer Email | | | |
| Address | | | |
| Street, Apt. # | City | State | Zip Code |



WHAT'S NEXT

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: ilcourts.info/clerks.



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

NEXT STEP FOR PERSON RECEIVING THIS FORM:

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 ilcourthelp.gov.

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