



ADDITIONAL PROOF OF DELIVERY MINOR GUARDIANSHIP

(MINOR GUARDIANSHIP)
IN THE STATE OF ILLINOIS, CIRCUIT COURT

COUNTY: _____
County Where You Are Filing the Case

GUARDIANSHIP OF:

First, Middle, and Last Name of Minor Child

Case Number
(Clerk fills in)

Additional Proof of Delivery continued from the *Notice of Hearing on Petition for Guardianship of a Minor*:

I am sending the *Petition for Guardianship of a Minor* and this *Notice of Hearing* to:

a. Name: _____

b. This person is: (*What is the relationship to the minor*)

- Minor's sibling who is at least 18 years old
 - Someone who has had legal or physical custody of the minor

c. I am sending the documents to this address:

Street, Apt. # *City* *State* *Zip Code*

By (*check all that apply*):

| Personal hand delivery.
You can only deliver to the person, person's family member over 13 at person's residence, person's lawyer, or the lawyer's office.

Mail or third-party carrier (FedEx, UPS, etc.) to the address listed above, with postage or delivery prepaid.

Location of mailbox or third-party carrier:

Address or Intersection

City _____ *State* _____

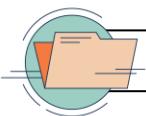
Mail from a prison or jail:

Name and Address of Prison or Jail

This document will be sent on:

Date: _____
Month, Day, Year

Time: _____
include AM or PM



File this form with your *Notice of Hearing on Petition for Guardianship of a Minor*.