COUNTY: County Where You Are Filing the Cose Enter the case information as it appears on your other court documents. PLAINTIFF/PETITIONER OR IN RE: Who started the case. DEFENDANTS/RESPONDENTS: Who the case was filed against. Case Number First, Middle, and Last Name, or Business Name DEFENDANTS/RESPONDENTS: Who the case was filed against. Case Number First, Middle, and Last Name, or Business Name DONLY use this form if you are asking the judge for permission to use a private process server who is not licensed. You do not need the judge's permission to use the sheriff or a licensed private process server to serve your documents (735 ILCS 5/2-202). 1. REQUEST TO USE A PROCESS SERVER WHO IS NOT LICENSED I am asking the court to approve the person listed below, who is over age 18, not a party to this case, and not a licensed private detective or registered employee of a licensed private detective agency: Name of Person Street, Apt. II City State Zip Code to serve the Summons and Complaint/Petition in this case on these defendants/respondents: ADDITIONAL INFORMATION Explain why you are asking to use a private process server who is not licensed (for example, the sheriff tried but was not able to serve the defendant/respondent). I want to use a private process server who is not licensed because: SIN SIN City State Zip Code to serve the Summons and Complaint/Petition in this case on these defendants/respondents: Print Your Name Print Your Name Print Your Name Print Your Name Attorney Number (if any) Print Your Name Attorney Number (if any) Print Your Name Attorney Number (if any)		LINOIS, CIRCUIT COURT		
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Case Number:
Case Number:

3. PROOF OF DELIVERY

Fill out the information below to show how you are sending the documents, under Rule <u>11</u>, to the other people in the case. If a person in the case has a lawyer, you must send the documents to their lawyer.

Name of Documents				
):				
Name:	Middle	Last Name		
Address:		Last Name		
Street, Apt. #	City	State	Zip Code	
Email Address:				
g: Electronically to the employed Electronical Electron		(EFSP).		
	ding the document to do not ha arrier to the address in 3a , with		_	documents by
Location of mailbox	or third-party carrier:			
Personal hand delive		or Intersection	City	State
	o the party, party's family member over	13 at party's residence,	party's lawyer, or part	y's lawyer's offic
Address				
Mail to the address	Street, Apt. # in 3a, from a prison or jail:	City	State	Zip Code
		of Prison or Jail		
is document will be sent on:	Date:	Time:		
	Date:		clude AM or PM	
☐ I am not sending these of OR -	documents to additional people.			
☐ I am sending these docu	ments to an additional person r	ot listed in 3a:		
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Name:				
First	Middle	Last Name		
Address:				
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_ _ ·	ding the document to do not ha carrier to the address in 3b , with		•	documents b
Location of mailbox	or third-party carrier:			
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Personal hand deliver to NOTE: You can only deliver to	ery at this address: o the party, party's family member ove	13 at party's residence,	party's lawyer, or part	y's lawyer's offi
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Address				

		Case Number:		
☐ Mail to the address in 3b, from a pr	rison or jail:			
	Name of Prison or Jail			
This document will be sent on: Date:		Time:		
	h, Day, Year	Include AM or PM		
I am sending the document to more than 2	people and have cor	mpleted an <i>Additional Proof of De</i>	elivery form.	
SIGN				
Under 735 ILCS 5/1-109, your signature means the	at:			
1) everything in this document is true and correct	., or I have been infor	med or I believe it to be true and	correct, and	
2) I understand that making a false statement on	this form is perjury ar	nd has penalties provided by law.		
If you are filling out this form online, sign your name by			rint your name.	
Your Signature <u>/s/</u>	Print Your Nar	me		
Your Phone Number	Attorney Num	nber (if any)		
Your Email (if you have one)				
Your Address				
Street, Apt. #	City	State	Zip Code	
Be sure to check your email every day so you do not r	miss important informat	tion, court dates, or documents from	n other parties.	



NEXT STEP FOR PERSON FILLING OUT THIS FORM:

When you file your *Motion*, ask the Circuit Clerk if you need to schedule a court date or if one will be scheduled automatically. In some counties, you may get the court date when you e-file. Include that court date in your *Notice of Court Date for Motion*.

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: <u>ilcourts.info/clerks</u>.



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

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>.