COUNTY:		
County Where You A	re Filing the Case	
Enter the case information as it appea	rs on your other court documents.	
PLAINTIFF/PETITIONER OR IN I		
Who started the case.	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	
serve your documents (<u>735 IL</u>		ed private process server t
serve your documents (735 IL REQUEST TO USE A PRO I am asking the court to approve	CESS SERVER WHO IS NOT LICENSED we the person listed below, who is over age 18, no	ot a party to this case, and
. REQUEST TO USE A PRO I am asking the court to approve not a licensed private detective	CESS SERVER WHO IS NOT LICENSED	ot a party to this case, and
serve your documents (735 IL REQUEST TO USE A PRO I am asking the court to approve	CESS SERVER WHO IS NOT LICENSED we the person listed below, who is over age 18, no	ot a party to this case, and
. REQUEST TO USE A PRO I am asking the court to approve not a licensed private detective	CESS SERVER WHO IS NOT LICENSED we the person listed below, who is over age 18, not experience or registered employee of a licensed private de	ot a party to this case, and
REQUEST TO USE A PRO I am asking the court to approve not a licensed private detective Name of Person Street, Apt. #	CESS SERVER WHO IS NOT LICENSED we the person listed below, who is over age 18, not experience or registered employee of a licensed private de	ot a party to this case, and etective agency:
REQUEST TO USE A PRO I am asking the court to approve not a licensed private detective Name of Person Street, Apt. #	CESS SERVER WHO IS NOT LICENSED We the person listed below, who is over age 18, not be or registered employee of a licensed private description. City State Zip Implaint/Petition in this case on these defendants	ot a party to this case, and etective agency:
REQUEST TO USE A PRO I am asking the court to approve not a licensed private detective Name of Person Street, Apt. # to serve the Summons and Core Names of defendants/respon	CESS SERVER WHO IS NOT LICENSED The the person listed below, who is over age 18, not are or registered employee of a licensed private described by the control of the cont	ot a party to this case, and etective agency:
REQUEST TO USE A PRO I am asking the court to approve not a licensed private detective Name of Person Street, Apt. # to serve the Summons and Core Names of defendants/respon ADDITIONAL INFORMAT	CESS SERVER WHO IS NOT LICENSED The the person listed below, who is over age 18, not be or registered employee of a licensed private described by the control of the contr	ot a party to this case, and etective agency: o Code s/respondents:

Case Number



SIGN	y W		
Under 735 ILCS 5/1-109, my signature n	neans that:		
1) Everything in this document is true a	nd correct, or I have been informed or I	believe it to be true a	nd correct, and
2) I understand that making a false state	ement on this form is perjury and has pe	enalties provided by la	ıw.
If you are filling out this form online, sign yo	our name by typing it. If you are filling out t	his form by hand, sign a	nd print your name.
Signature <u>/s/</u>	Print Name		
I am completing this form for myse	elf		
Phone Number	Email (if you have one)		
Address			
Street, Apt. #	City	State	Zip Code
Be sure to check your email every day so yo	ou do not miss important information, cour	t dates, or documents f	rom other parties.
I am a lawyer completing this form	on behalf of a client (Client name):		
awyer Name	Attorney N	umber	
_awyer Phone Number	Law Firm		
_awyer Email			
Address			
Street, Apt. #	City	State	Zip Code
who have already been served. If a lawyer. File this form with the Circu documents to.	you will send your documents under Rule of person in the case has a lawyer, you m wit Clerk, but do not list the Clerk below of wery and the following court documents	nust send your docum as a person you are se	ents to their
By email to this email address			
_ ,			
Through an approved e-filin	g website (EFSP) to this email address:		
sending documents to have a	ectronically (by email or through an EFS an email address. If you or the person you ission from the judge, you may send doo	ou are sending to do n	ot have an email
☐ I am sending the documents	to this address:		
Street. Apt. #	City Sto	 ate	Zip Code

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.

By *(check all that apply):*Personal hand delivery.

		Number	
Mail or third-party ca	rrier (FedEx, UPS, etc.) to the address listed abo	ove, with postag	e or delivery prepai
Location of mailbo	x or third-party carrier:		
	Address or Intersection	City	State
☐ Mail from a prison or	jail:		
	Name and Address of Prison or Jail		
C. The documents will be sent of	on: Date:	Time:	
	Month, Day, Year	Time: Include AM or PM	
☐ I am sending the document	to more than 1 person and have completed an	additional <i>Proo</i>	f of Delivery form.
SIGN			
Under <u>735 ILCS 5/1-109</u> , my signature	means that:		
1) Everything in this document is true	and correct, or I have been informed or I believ	ve it to be true a	nd correct, and
2) I understand that making a false sta	tement on this form is perjury and has penaltie	es provided by la	aw.
If you are filling out this form online, sign	your name by typing it. If you are filling out this form	m by hand, sign a	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			
AddressStreet, Apt. #	 City	State	Zip Code
Street, Apt. #	City you do not miss important information, court dates	State	Zip Code
Street, Apt. # Be sure to check your email every day so	City	State s, or documents f	Zip Code rom other parties.
Street, Apt. # Be sure to check your email every day so	City you do not miss important information, court dates m on behalf of a client (Client name):	State s, or documents f	Zip Code rom other parties.
Street, Apt. # Be sure to check your email every day so I am a lawyer completing this for Lawyer Name	City you do not miss important information, court dates m on behalf of a client (Client name):	State s, or documents f	Zip Code rom other parties.
Street, Apt. # Be sure to check your email every day so I am a lawyer completing this for Lawyer Name	City you do not miss important information, court dates m on behalf of a client (Client name): Attorney Number Law Firm	State s, or documents f	Zip Code rom other parties.
Street, Apt. # Be sure to check your email every day so I am a lawyer completing this form Lawyer Name Lawyer Phone Number	City you do not miss important information, court dates m on behalf of a client (Client name): Attorney Number Law Firm	State s, or documents f	Zip Code rom other parties.



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. 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*.



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>.