



# AFFIRMATIVE DEFENSES

**(ANSWER OR RESPONSE)**

IN THE STATE OF ILLINOIS, CIRCUIT COURT

**COUNTY:** \_\_\_\_\_  
*County Where You Are Filing the Case*

*Enter the case information as it appears on your other court documents.*

**PLAINTIFF/PETITIONER OR IN RE:** \_\_\_\_\_  
*Who started the case. First, Middle, and Last Name, or Business Name*

**DEFENDANTS/RESPONDENTS:** \_\_\_\_\_  
*Who the case was filed against.*  
\_\_\_\_\_  
\_\_\_\_\_  
*First, Middle, and Last Name, or Business Name*

**Case Number**



Use this form only if you have affirmative defenses in your case. There will not be affirmative defenses in every case.

You should file your *Affirmative Defenses* form **at the same time** as a separate document from your *Answer or Response*. If you do not file your *Affirmative Defenses* at the same time as your *Answer*, you may not be able to file them later.

## AFFIRMATIVE DEFENSES

*Affirmative Defenses are your reasons why the other party should not win even if everything in their Complaint or Petition is true. Attach another form if you have more than 3 affirmative defenses.*

### These affirmative defenses are incorporated into my Answer/Response:

A. Affirmative Defense: \_\_\_\_\_  
*Name of Affirmative Defense*

In support of this affirmative defense, I state the following facts:

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B. Affirmative Defense: \_\_\_\_\_  
*Name of Affirmative Defense*

In support of this affirmative defense, I state the following facts:

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C. Affirmative Defense: \_\_\_\_\_  
*Name of Affirmative Defense*

In support of this affirmative defense, I state the following facts:

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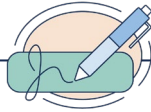
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## SIGN

Under [735 ILCS 5/1-109](#), your signature means that you:

1) certify that everything in this document is true and correct, and 2) 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 this form by hand, sign and print your name.

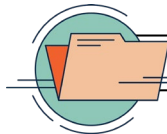
Your Signature /s/ \_\_\_\_\_ Print Your Name \_\_\_\_\_

Your Address \_\_\_\_\_  
*Street, Apt. # City State Zip Code*

Your Phone Number \_\_\_\_\_ Attorney Number (if any) \_\_\_\_\_

Your Email (if you have one) \_\_\_\_\_

Be sure to **check your email every day** so you do not miss important information, court dates, or documents from other parties.



File this form **at the same time** as your *Answer or Response*.