| THE SUPRISON | APPEARANCE (CIVIL) | |
|-----------------------------------|---|-----------------------------|
| STATE OF ILLINOIS AUG. 25 1818 | IN THE STATE OF ILLINOIS, CIRCUIT COURT | |
| Social | This is my official notice that I am participating in this case. | |
| | | |
| (| 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. | Case Number |
| | | Case Number |
| | First Middle and Last Names of Dusiness Names | |
| | First, Middle, and Last Name, or Business Name | |
|) If your | want to request a trial with a judge and a jury (jury trial), you will also need to fill | out and file a consucto |
| The de | ant a trial with a judge only (bench trial), do not file the separate <i>Jury Request</i> for eadline for filing a <i>Jury Request</i> is different depending on the type of case and you ff, usually you must file a <i>Jury Request</i> at the same time that you file the case. If y | r situation. If you are the |
| usually | you must file a Jury Request at the same time as your Appearance. | · |
| 4 11 | AAAF | |
| | AME & INFORMATION you do not have a lawyer, enter your information below to tell the court how to ad | ldress you. If you are a |
| | wyer entering an appearance for a client, enter your client's information below. | aress you. If you are a |
| | Name: | |
| | | Name |
| | Pronouns (Optional): | |
| | ☐ He/Him ☐ She/Her ☐ They/Them ☐ Other: | |
| | Prefix (Optional): | |
| | Mr. Ms. Mrs. Other: | |
| | | |
| | | |
| | PPEARANCE | |
| Che | ck only one box. | |
| | I do not have a lawyer and I am entering my own appearance in this case. With | th this <i>Appearance</i> |
| | form, I am telling the court that I am participating in this case. | |
| • | OR - | |
| | I am a lawyer entering my appearance for a client in this case: | |

Attorney or Firm Name

| Case Number: |
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| SIGN | | | | |
|--|--|------------------|------------------|----|
| Under <u>Illinois Supreme Court Rule 137</u> , ye | our signature means that you: | | | |
| 1) read the document, 2) believe it is true | e and correct, and 3) are not filing it to cause | e delay or for a | nother bad reaso | n. |
| If you are filling out this form online, sign print your name. | your name by typing it. If you are filling out | this form by h | and, sign and | |
| Your Signature /s/ | Print Your Name | | | _ |
| Your 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 from other parties.

Your Phone Number _____ Attorney Number (if any) _____

3. PROOF OF DELIVERY

Your Email (if you have one) _____

Fill out the information below to show how you are sending this document to the other people in the case. If a person in the case has a lawyer, **you must send this document to their lawyer.**

| Name: | | | |
|---|--|--|---|
| First | Middle | Last Name | |
| Address: | | | |
| Street, Apt. # | City | State | Zip Code |
| Email Address: | | | |
| Electronically to the email addres | ss in 3a· | | |
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| Using an approved electron | ia filina aamulaa muavidan/F | · F C D \ | |
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| | | Case I | Number: | |
|--|---------------------------------|--------------------------------|--------------------|------------------------|
| b. | s to additional people | | | |
| ☐ I am sending these documents to | an additional nerson r | not listed in 3a: | | |
| _ | · | iot listed iii sa. | | |
| Name: | Middle | Last Name | | |
| Address: | | | | |
| Street, Apt. # | City | State | Zip Code | |
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| By: Electronically to the email address in By email (not through an EFSP) Using an approved electronic f | | EFSP). | | |
| ☐ I or the person I am sending the doc ☐ Mail or third-party carrier to the | e address in 3b , with p | ostage or delivery char | ge prepaid. | document by: |
| Location of mailbox or third-par | ty carrier: City | | | State |
| Personal hand delivery at this ac NOTE: You can only deliver to the party, | ddress: | r 13 at party's residence, par | rty's lawyer, or p | arty's lawyer's office |
| | | | | |
| | . #, City, State, and Zip Cod | | | |
| Mail to the address in 3b , from | | e of Prison or Jail | | |
| This document will be sent on: Date: | | - | | |
| | Month, Day, Year | | de AM or PM | |
| I am sending the document to more t | han 2 people and hav | e completed an <i>Additio</i> | nal Proof of D | elivery form. |
| SIGN | | | | |
| Under 735 ILCS 5/1-109, your signature m | eans that you: | | | |
| 1) certify that everything in this document this form is perjury and has penalties prov | is true and correct, a | nd 2) understand that r | making a false | statement on |
| If you are filling out this form online, sign print your name. | your name by typing if | . If you are filling out th | nis form by ha | ınd, sign and |
| Your Signature /s/ | Print Your N | lame | | |
| 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 other parties. | | | t dates, or do | cuments from |

| Case Number: | |
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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/CircuitClerks.



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

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>.