This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts.

STATE OF II	•	ADDITIONAL REASONS (SMALL CLAIMS COMPLAINT)	For Court Use Only
Instructions ▼			
Directly above, enter the name of the county where you are filing the case.	Plaintiff (First, middle, last name)		
Enter your name as Plaintiff.	V.		
Enter the names of all people or businesses you are suing as Defendants. The Circuit Clerk will add a Case Number.	Defendants (First, middle, last name or business name):		Case Number

If you do not have enough room on the Small Claims Complaint for your reasons, fill out this form and attach it to the Small Claims Complaint.

5. Defendants owe me this amount of money because *(continued from the Small Claims Complaint)*: