

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY		PROOF OF SERVICE OF SMALL CLAIMS SUMMONS & SMALL CLAIMS COMPLAINT	<i>For Court Use Only</i>
Instructions ▼	Plaintiff (First, middle, last name) _____ v. Defendants (First, middle, last name or business name): _____ _____ <input type="checkbox"/> Alias Summons (Check this box if this is not the 1st Summons issued for this Defendant.)		Case Number _____
Directly above, enter the name of the county where you are filing the case.			
Enter your name as Plaintiff.			
Enter the names of all people or businesses you are suing as Defendants.			
Enter the Case Number given by the Circuit Clerk.			

STOP. Do not complete the rest of this form. The Circuit Clerk, sheriff, or special process server will fill in the form.

My name is _____, **and I state:**
First, Middle, Last

☐ **that I served the *Small Claims Summons* and *Small Claims Complaint* on the Defendant,**
_____ **as follows:**
First, Middle, Last

By Circuit Clerk:

☐ By certified mail mailed by the Circuit Clerk:
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Street Address, Unit #: _____
City, State, ZIP: _____

By sheriff or special process server:

☐ Personally on the Defendant:
☐ Male ☐ Female ☐ Non-Binary Approx. Age: _____ Race _____
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Street Address, Unit #: _____
City, State, ZIP: _____

☐ On someone else at the Defendant's home who is at least 13 years old and is a family member or lives there:
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Street Address, Unit #: _____
City, State, ZIP: _____
And left it with: _____

First, Middle, Last
☐ Male ☐ Female ☐ Non-Binary Approx. Age: _____ Race _____
and by sending a copy to this Defendant in a postage-paid, sealed envelope to the above address on _____
Date

☐ On the Corporation's agent, _____
First, Middle, Last
☐ Male ☐ Female ☐ Non-Binary Approx. Age: _____ Race _____
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Street Address, Unit #: _____
City, State, ZIP: _____

☐ I was not able to serve the **Small Claims Summons** and **Small Claims Complaint** on the Defendant,

First, Middle, Last

I made the following attempts to serve the **Small Claims Summons** and **Small Claims Complaint** on the Defendant:

1. On this _____ at this time: _____ ☐ a.m. ☐ p.m.

Street Address, Unit #: _____

City, State, ZIP: _____

Other information about service attempt: _____

2. On this _____ at this time: _____ ☐ a.m. ☐ p.m.

Street Address, Unit #: _____

City, State, ZIP: _____

Other information about service attempt: _____

3. On this _____ at this time: _____ ☐ a.m. ☐ p.m.

Street Address, Unit #: _____

City, State, ZIP: _____

Other information about service attempt: _____

DO NOT complete this section. The sheriff or private process server will complete it.

Under the Code of Civil Procedure, [735 ILCS 5/1-109](#), making a statement on this form that you know to be false is perjury, a Class 3 Felony.

If you are a special process server, or licensed private detective, your signature certifies that everything on the *Proof of Service of Small Claims Summons & Small Claims Complaint* is true and correct to the best of your knowledge. You understand that making a false statement on this form could be perjury.

By:

Signature by

☐ Sheriff

☐ Special process server/

licensed private
detective

FEES

By certified registered mail: \$ _____

Service and Return: \$ _____

Miles: \$ _____

Total \$ _____

Print Name

If *Summons* is served by licensed private detective or private detective agency:

License Number: _____