STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY	**MOTION**	*For Court Use Only*

Instructions ▼	
Directly above, enter the name of the county where the case was filed.	
Enter the name of the person who started the lawsuit as Plaintiff/Petitioner.	**Plaintiff / Petitioner** *(First, middle, last name)*
Enter the name of the person being sued as Defendant/Respondent.	v.
Enter the Case Number given by the Circuit Clerk.	**Defendant / Respondent** *(First, middle, last name)* **Case Number**

In **1**, check if you are the Plaintiff/Petitioner or Defendant/Respondent.	**1.** *Motion* by: ☐ Plaintiff/Petitioner ☐ Defendant/Respondent
In **2**, enter what you are asking the court for with this *Motion*.	**2.** *Motion* for: _____
In the lines write what you are asking the court to do, and the reasons why the judge should agree with you.	

<table>
<tr><td>

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.

</td></tr>
</table>

I certify that everything in the *Motion* is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under 735 ILCS 5/1-109.

/s/
_____   _____
Your Signature   *Street Address*

_____   _____
Print Your Name   *City, State, ZIP*

_____
Telephone

<table>
<tr><td>

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

</td></tr>
<tr><td>

Enter your complete current address and telephone number.

</td></tr>
</table>

PROOF OF DELIVERY

<table>
<tr><td>

In **1a**, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.

</td></tr>
<tr><td>

In **1b**, check the box to show how you sent the document, and fill in any other information required on the blank lines.

</td></tr>
<tr><td>

CAUTION: If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court document.

</td></tr>
</table>

1. I sent this document:

    a. To:
        Name: _____
              First   *Middle*   *Last*
        Address: _____
              Street, Apt #   *City*   *State*   *ZIP*
        Email address: _____

    b. By: ☐ Personal hand delivery
             ☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

                _____
                Address of Post Office or Mailbox

             ☐ Third-party commercial carrier, with delivery paid for at:

                _____
                Name (for example, FedEx or UPS) and office address

             ☐ The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)
             ☐ Email *(not through an EFM or EFSP)*
             ☐ Mail from a prison or jail at:

                _____
                Name of prison or jail

<table>
<tr><td>

In **c**, fill in the date and time that you sent the document.

</td></tr>
</table>

    c. On: _____
            Date
        At: _____ ☐ a.m. ☐ p.m.
            Time

<table>
<tr><td>

In **2**, if you sent the document to more than 1 party or lawyer, fill in **a**, **b**, and **c**. Otherwise leave **2** blank.

</td></tr>
</table>

2. I sent this document:

    a. To:
        Name: _____
              First   *Middle*   *Last*
        Address: _____
              Street, Apt #   *City*   *State*   *ZIP*
        Email address: _____

b.   By: ☐ Personal hand delivery

☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

_____

Address of Post Office or Mailbox

☐ Third-party commercial carrier, with delivery paid for at:

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☐ Email *(not through an EFM or EFSP)*

☐ Mail from a prison or jail at:

_____

Name of prison or jail

c.   On: _____

Date

At: _____   ☐ a.m.   ☐ p.m.

Time

In **3**, if you sent the document to more than 2 parties or lawyers, fill in **a**, **b**, and **c**. Otherwise leave **3** blank.

3.   I sent this document:

a.   To:

Name: _____

First   *Middle*   *Last*

Address: _____

Street, Apt #   *City*   *State*   *ZIP*

Email address: _____

b.   By: ☐ Personal hand delivery

☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

_____

Address of Post Office or Mailbox

☐ Third-party commercial carrier, with delivery paid for at:

_____

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☐ Email *(not through an EFM or EFSP)*

☐ Mail from a prison or jail at:

_____

Name of prison or jail

c.   On: _____

Date

At: _____   ☐ a.m.   ☐ p.m.

Time

If you sent your document to more than 3 parties or lawyers, check the box and file the *Additional Proof of Delivery* form with this form.

☐ I have completed an *Additional Proof of Delivery* form.

I certify that everything in the Proof of Delivery is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under 735 ILCS 5/1-109.

/s/
_____   _____
Your Signature   *Street Address*

_____   _____
Print Your Name   *City, State, ZIP*

_____
Telephone