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

Instructions ▼						
Enter the Appellate	Appellate Case No.:					
Court case number.	IN THE ADDELL ATE COURT OF					
Just below "In the Appellate Court of	IN THE APPELLATE COURT OF					
Illinois," enter the	ILLINOIS					
number of the appellate district						
where the appeal was	District					
filed.						
If the case name in the trial court began						
with "In re" (for	In re	Appeal from the Circuit Court				
example, "In re		ofCounty				
Marriage of Jones"), enter that phrase. If						
the case name did not		Trial Court Case No:				
begin with "In re," enter the names of the						
parties as they	Plaintiff/Petitioner in the trial court (First, middle, last name)					
appeared in the trial court documents.	☐ Appellant ☐ Appellee	Honorable				
Below each party,						
check Appellant for the party filing the	v.	Judge, Presiding				
appeal and check						
Appellee for the						
party responding to the appeal.						
At the far right, enter	Defendant/Respondent in the trial court (First, middle, last name)					
the trial court county, trial court case						
number, the trial	☐ Appellant ☐ Appellee					
judge's name.						
In 1, enter your name.	NOTICE OF CHANGE OF ADDRESS					
Then select all the boxes (mailing	1. Please take notice of the following change of address for:					
address, email address,	Name:					
or both) that apply for the information you	First Middle	Last Name				
are updating.	Business or Firm Name (if applicable):					
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	Select all boxes that apply for the information you are upd	ating with the court.				
If you are changing your mailing address,	New Mailing Address:					
select the first box. If	Street, Apt #					
you are changing your email address, select	Street, Apt #					
the second box. If both						
your mailing address and email are being	City State	ZIP				
updated, select and	New Email Address:					
complete both.						
In 2, select only one box to show who you	2. I AM THE (check only one box)					
are in this appeal.	Appellant Appellee					
	Attorney for:					
	☐ Other:					

If you are completing this form on a computer, sign your name by typing it. If	/s/ Your Signature		Street Add	ress	
you are completing it by hand, sign and print your name. Fill in your address, telephone number,	Print Your Name		City, State,	, ZIP	
and email address, if you have one.	Email		 Telephone		
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GETTING COURT I from other parties or fr	DOCUMENTS BY EMAIL: Be sure to rom the court.	check your email ev	very day so you do not mi	ss important informa	ntion or documents
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they have a lawyer, you must enter the lawyer's information.	Address: <u>St</u> St Email addres	reet, Apt # s:	City	State	ZIP
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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.	Under 735 ILCS 5/1-109, my signature means: 1) Everything in this document is true and correct, or I have been informed or I believe it to be true and correct, and 2) I 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.					
	/s/		Drint Nama			
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Enter your complete address, telephone number, and email address, if you have	Phone Number	-	Email (if you have one)			
one.	Street Address		City, State, ZIP			
GETTING COURT DOO from other parties or from		ure to check your email every d	ay so you do not miss important	information or documents		
Only complete this section if you are a	I am a lawyer completing this form on behalf of a client (Client name)					
licensed attorney completing the form.	Lawyer Name		Attorney Number			
	Lawyer Phone Number		Law Firm			
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