

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY	MOTION TO REMOVE EVICTION COURT FILE FROM PUBLIC RECORD	<i>For Court Use Only</i> _____ Case Number
Instructions ▼ Directly above, enter the name of the county where the case was filed. Enter the full names of Plaintiff, Defendants, and the case number as listed on the <i>Eviction Complaint</i> .	Plaintiff (For example, the landlord or owner): _____ _____ _____ v. Defendants (For example, the tenants or occupants): _____ _____ _____ <input type="checkbox"/> Unknown Occupants (Check the box for Unknown Occupants if it was checked on the Eviction Complaint.)	

In 1, check the box for all parties who are bringing this motion.

In 2, check this box only if the plaintiff tells you they are not going to fight removing your court file from the public record. Otherwise, leave it blank.

1. This motion is brought pursuant to [735 ILCS 5/9-121](#) (entitled "Sealing of Court File") by:
 Plaintiff Defendant Other: _____

2. I have contacted the other parties, and no one has an objection to removing this court file from the public record.

3. The court file in this matter should be removed from the public record because (check a or b):
 a. Foreclosure: Defendant is facing eviction from or was evicted from a building in foreclosure.

OR

b. This action is sufficiently without a basis in fact or law. The facts or law were wrong because (check all that apply and explain below):

- the landlord had no reason to file the eviction.
- I was not properly served with an eviction notice or summons and a copy of the eviction complaint.
- Other: _____

Additional details: _____

Removing this case from the public record is in the interests of justice. It is more important to keep the court file from being seen by the public than it is to allow the public to see it because (check all that apply and explain below):

- the eviction record will make it harder to find housing, find a job, or get credit.
- Other: _____

Additional details: _____

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.

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*

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.

Print Your Name *City, State, ZIP*

Enter your complete address, telephone number, and email address, if you have one.

Telephone *Email*

Attorney # (if any)

GETTING COURT DOCUMENTS BY EMAIL: You should use an email account that you do not share with anyone else and that you check every day. If you do not check your email every day, you may miss important information, notice of court dates, or documents from other parties.

PROOF OF DELIVERY

1. I am sending the *Motion*

In **1a**, enter the name, mailing address, and email address of the party you are sending the document to. If they have a lawyer, you **must** enter the lawyer's information.

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

In **1b**, check the box to show how you are sending the document. **CAUTION:** If you and the person you are sending the document to have an email address, you **must** use one of the first two options. Otherwise, you may use one of the other options.

b. By:
 An approved electronic filing service provider (EFSP)
 Email (*not through an EFSP*)
Only use one of the methods below if you do not have an email address, or the person you are sending the document to does not have an email address.
 Personal hand delivery to:
 The party
 The party's family member who is 13 or older, at the party's residence
 The party's lawyer
 The party's lawyer's office
 Mail or third-party carrier

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

c. On: _____ at: _____ a.m. p.m.
Date *Time*

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

In **2a**, enter the name, mailing address, and email address of the party you are sending the document to. If they have a lawyer, you **must** enter the lawyer's information.

In **2b**, check the box to show how you are sending the document. **CAUTION:** If you and the person you are sending the document to have an email address, you **must** use one of the first two options. Otherwise, you may use one of the other options.

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

If you are sending your document to more than 2 parties or lawyers, check the box and file the *Additional Proof of Delivery* with this

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

Enter your complete address, telephone number, and email address, if you have one.

2. I am sending the *Motion*:

a. To:
 Name: _____
 First *Middle* *Last*

Address: _____
 Street, Apt # *City* *State* *ZIP*

Email _____

b. By: An approved electronic filing service provider (EFSP)
 Email (*not through an EFSP*)

Only use one of the methods below if you do not have an email address, or the person you are sending the document to does not have an email address.

- Personal hand delivery to:
 - The party
 - The party's family member who is 13 or older, at the party's residence
 - The party's lawyer
 - The party's lawyer's office
- Mail or third-party carrier

c. On: _____ at: _____ a.m. p.m.
 Date *Time*

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 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

 Email

 Attorney # (if any)

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