This form is approved by the Illinois Supreme Court and is required to be accepted in the Illinois Supreme Court.
Forms are free at ilcourts.info/forms.

Instructions

Print this cover page on light blue paper.

Check the 1st box if your case involves parental responsibility or parenting time (custody/visitation rights), or relocation of a child. Check the 2nd box if your case involves delinquent minor proceedings. Check the 3rd box if your case involves pretrial release.

☐ **THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER RULE 311(a).**

☐ **THIS APPEAL INVOLVES A DELINQUENT MINOR PROCEEDING UNDER THE JUVENILE COURT ACT.**

☐ **THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER RULE 604(h).**

Case No.: _____

IN THE
SUPREME COURT OF ILLINOIS

Enter the Supreme Court case number.

If the case name in the trial and/or appellate court began with "In re" (e.g., "In re Marriage of Jones"), enter that name. Below that, enter the names of the parties as they appeared in the trial/appellate court, and check the "Respondent" box under your name and the "Petitioner" box under the other party's name.

To the far right, enter the number of the appellate district, appellate court case number, trial court county, trial court case number, and trial judge's name.

In re _____

_____

Plaintiff/Petitioner in the trial court *(First, middle, last names)*

☐ **Petitioner** in the Supreme Court

☐ **Respondent** in the Supreme Court

v.

_____

Defendant/Respondent in the trial court *(First, middle, last names)*

☐ **Petitioner** in the Supreme Court

☐ **Respondent** in the Supreme Court

Petition for Leave to Appeal from the Appellate Court, Court, _____ **District**

Appellate Court Case No.

_____

Appeal from the Circuit Court of

_____ **County**

Trial Court Case No.:

_____

_____

Honorable

_____

Judge, Presiding

ANSWER TO PETITION FOR LEAVE TO APPEAL

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

Your Information

Name: _____
First *Middle* *Last*

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

Phone: _____ Email: _____

Firm Name (*if any*): _____ 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 or documents from other parties or from the court.

YOU DO NOT NEED TO INCLUDE A STATEMENT OF FACTS, but you may include it if you disagree with the Statement of Facts in the *Petition for Leave to Appeal*.

Tell the story of what happened in the trial court. Put the specific pages of the record on appeal where each fact appears. Refer to pages of the report of proceedings (transcripts) as "R. [page]." Refer to the other pages of the record on appeal as "C. [page]." For example, "On January 2, 2015, the plaintiff filed his complaint. C.1." Then tell what happened in the appellate court.

If you include a Statement of Facts, you should describe the following:

- what the complaint or petition said,
- anything relevant that happened in court before the trial,
- the testimony of important witnesses,
- the content of important documents,
- how the trial judge ruled, any findings by the jury, and anything that happened in court after the trial.

Write the specific pages of the record on appeal where each fact appears.

Tell the story accurately and fairly. Do not argue your case or make other comments here.

Be sure to number each page of your *Answer*. Starting with this page, number your pages 1, 2, 3, etc.

STATEMENT OF FACTS

[Refer to Illinois Supreme Court Rule 315(c)(4)]

If you need more room, add 1 or more *Additional Statement of Facts* forms after this page.

ARGUMENT

[Refer to Illinois Supreme Court Rule 315(c)(5)]

State your argument on this page and any additional pages you need. Explain all the reasons why the Illinois Supreme Court should **not** review the case. Use the important facts of your case and any appropriate authorities (cases and statutes/laws) to help you do this.

If you need more room, add 1 or more *Additional Argument* forms after this page.

CONCLUSION

Respondent requests that this court deny the *Petition for Leave to Appeal* and grant any other relief that the court finds appropriate.

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.
Remember to go back and number all the pages of the *Answer to Petition for Leave to Appeal* after you have finished all the sections.

Respectfully submitted,

/s/
Signature

_____
Print Name

Rule 315(f) and Rules 341-343 explain the format, service, and filing of an *Answer to Petition for Leave to Appeal*. The *Answer* must contain no more than 20 pages OR no more than 6,000 words. Don't count these pages:

- Cover Page
- Certificate of Compliance
- Certificate of Service/Proof of Delivery
- Appendix

If your *Answer* is 20 pages or less, add the number of pages in your *Answer* (not counting the pages listed above) and check the box next to "pages."

If your *Answer* is more than 20 pages, but is within the word limit, insert the number of words in your *Answer* (not counting the pages listed above) and check the box next to "words."

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.

CERTIFICATE OF COMPLIANCE

[Refer to Illinois Supreme Court Rule 341(c)]

I certify that this *Answer to Petition for Leave to Appeal* conforms to the requirements of Rules 315(f), 341(a) and 341(b). The length of this *Answer*, excluding the pages or words contained in the Rule 341(d) cover, the Rule 341(c) certificate of compliance, certificate of service/proof of delivery and those matters to be appended to the *Answer* under Rule 315(f) is

_____ .

☐ pages or ☐ words (*check one*)

/s/
Signature

Print Name

Enter the Case Number given by the Supreme Court Clerk: _____

PROOF OF DELIVERY

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

A. I am sending the *Answer to Petition for Leave to Appeal*

To:

Name: _____
First *Middle* *Last*

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

Email address: _____

Then, check the box to show how you are sending the document.

By: ☐ Electronically to the email address in **A**:

☐ Email *(not through an EFSP)*.

☐ Using an approved electronic filing service provider (EFSP).

CAUTION: If you and the person you are sending the document to have an email address, you **must** use one of the first two electronic options listed above. Otherwise, you may use one of the other options listed below.

☐ I or the person I am sending the document to do **not** have an email address. I am sending the document by (*choose one*):

☐ Mail or third-party carrier to the address in **A**, with postage or delivery charge prepaid. Location of the mailbox or third-party carrier:

_____
Address or Intersection *City* *State*

☐ Personal hand delivery at this address:
(*Note: You can only deliver it to the party, the party's family member over 13 at the party's residence, the party's lawyer, or the party's lawyer's office.*)

_____
Address – Street, Apt #, City, State, and Zip Code

☐ Mail to the address in **A**, from a prison or jail at:

_____
Name of Prison or Jail

Fill in the date and time that you are sending the document.

This document will be sent on:

Date: _____ Time: _____
Month, Day, Year *Include AM or PM*

In **B**, if you are **not** sending it to a 2nd person or lawyer, check the box and leave the rest of **B** blank. If you **are** sending it to more than 1 person, check the second box and enter their name, mailing address, and email address. If the other person has a lawyer, you **must** enter the lawyer's information.

B.

☐ I am **not** sending the *Answer to Petition for Leave to Appeal* to another person or lawyer.

☐ I **am** sending the *Answer to Petition for Leave to Appeal* to an additional person or lawyer, not listed in **A**:

To:

Name: _____
First *Middle* *Last*

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

Email address: _____

Then, check the box to show how you are sending the document.

By: ☐ Electronically to the email address in **B**:

☐ Email *(not through an EFSP)*.

☐ Using an approved electronic filing service provider (EFSP).

CAUTION: If you and the person you are sending the document to have an email address, you **must** use one of the first two electronic options listed above. Otherwise, you may use one of the other options listed below.

☐ I or the person I am sending the document to do **not** have an email address. I am sending the document by (*choose one*):

☐ Mail or third-party carrier to the address in **B**, with postage or delivery charge prepaid. Location of the mailbox or third-party carrier:

_____
Address or Intersection *City* *State*

☐ Personal hand delivery at this address:
(*Note: You can only deliver it to the party, the party's family member over 13 at the party's residence, the party's lawyer, or the party's lawyer's office.*)

_____
Address – Street, Apt #, City, State, and Zip Code

☐ Mail to the address in **B**, from a prison or jail at:

_____
Name of Prison or Jail

Fill in the date and time that you are sending the document.

This document will be sent on:

Date: _____ Time: _____
Month, Day, Year *Include AM or PM*

In **C**, if you are **not** sending it to a 3rd person or lawyer, check the box and leave the rest of **C** blank. If you **are** sending it to another person, check the second box and enter their name, mailing address, and email address. If the other person has a lawyer, you **must** enter the lawyer's information.

Then, check the box to show how you are sending the document.

C.

☐ I am **not** sending the *Answer to Petition for Leave to Appeal* to another person or lawyer.

☐ I **am** sending the *Answer to Petition for Leave to Appeal* to an additional person or lawyer, not listed in **A or B**:

To:

Name: _____
First *Middle* *Last*

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

Email address: _____

By: ☐ Electronically to the email address in **C**:

☐ Email *(not through an EFSP)*.

☐ Using an approved electronic filing service provider (EFSP).

CAUTION: If you and the person you are sending the document to have an email address, you **must** use one of the first two electronic options listed above. Otherwise, you may use one of the other options listed below.

☐ I or the person I am sending the document to do **not** have an email address. I am sending the document by (*choose one*):

☐ Mail or third-party carrier to the address in **C**, with postage or delivery charge prepaid. Location of the mailbox or third-party carrier:

_____
Address or Intersection *City* *State*

☐ Personal hand delivery at this address:
(*Note: You can only deliver it to the party, the party's family member over 13 at the party's residence, the party's lawyer, or the party's lawyer's office.*)

_____
Address – Street, Apt #, City, State, and Zip Code

Enter the Case Number given by the Supreme Court Clerk: _____

☐ Mail to the address in **C**, from a prison or jail at:

_____
Name of Prison or Jail

Fill in the date and time that you are sending the document.

This document will be sent on:

Date: _____ Time: _____
Month, Day, Year *Include AM or PM*

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

☐ I am sending the *Answer to Petition for Leave to Appeal* to more than 3 people and have completed an *Additional Proof of Delivery* form.

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 under 735 ILCS 5/1-109 that everything in this document is true and correct, or I have been informed or I believe it to be true and correct, and I understand that making a false statement on this form is perjury and has penalties provided by law.

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.

/s/	
Your Signature	*Street Address*
Print Your Name	*City, State, ZIP*
Telephone	*Email*
Firm Name (if any)	*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 or documents from other parties or from the court.

Enter the Case Number given by the Supreme Court Clerk: _____

APPENDIX

You do not need to include this section, but you may do so if there is information from the record on appeal that was not in the *Petition for Leave to Appeal*.

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