

STATEMENT IN SUPPORT OF NOTICE BY PUBLICATION

	(MINOR GUARDIANSHIP) IN THE STATE OF ILLINOIS, CIRCUIT COURT	
	COUNTY:	
	COUNTY:	
	GUARDIANSHIP OF:	
		Case Number
	First, Middle, and Last Name of Minor Child	(Clerk fills in)
	ublication means printing notice of a court case in a newspaper. Publication can be use court case and court date when you cannot find them.	ed to notify someone of
nc co	se this form to explain why you need to notify someone by publication. You can use it otify them by mail or in person. You must file this form for each person you notify by pounties, you must first file a motion asking the judge for permission to publish notice. A ore information. See page 4 and 8 of <i>How to File for Guardianship of a Minor</i> for more	per. Publication can be used to notify someone of publication. You can use it only if you are unable to each person you notify by publication. In some mission to publish notice. Ask your Circuit Clerk for canship of a Minor for more instructions. Widing the following information: BY PUBLICATION Middle, Last Name Conship to the minor) ody of this minor;
	- Arms	
I,	am providing the following inform Name of Proposed Guardian	ation:
INF	FORMATION ABOUT PERSON TO BE NOTIFIED BY PUBLICATION	
	Name of person I want to notify by publication:	
	First, Middle, Last Name	
	2. This person is: (Check the box that matches their relationship to the minor) The parent of the minor;	
	☐ The minor's adult sibling;	
	Someone who has or had legal or physical custody of this minor;	
	Other:	•
	3. Their last known address is (check one, fill in as much information as you know):	
	Street, Apt. # City State 2	Zip Code
	Unknown.	

		Case Number		
4. I cannot give notice to the				
searching the interne	ter diligent inquiry (for example, asking the t) done to try to find the person:	eir friends and family f	or their location or	
They are concealed (h	nidden) within the state.			
SIGN				
Under <u>735 ILCS 5/1-109</u> , my signature	e means that:			
1) Everything in this document is true	e and correct, or I have been informed or I	believe it to be true ar	nd correct, and	
2) I understand that making a false st	atement on this form is perjury and has pe	enalties provided by la	w.	
If you are filling out this form online, sigr	n your name by typing it. If you are filling out t	his form by hand, sign ar	nd print your name.	
Signature <u>/s/</u>	Print Name			
I am completing this form for my				
Phone Number	Email (if you have one)			
Address				
Street, Apt. #	City	State	Zip Code	
Be sure to check your email every day so	o you do not miss important information, cour	t dates, or documents fr	om other parties.	
I am a lawyer completing this for	rm on behalf of a client (Client name):			
Lawyer Name	Attorney N	umber		
Lawyer Phone Number	Law Firm			
Lawyer Email				
Address				
Street, Apt. #	City	State	Zip Code	