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.

Enter the names of the people and businesses sued as Defendants/ Respondents.

Enter the Case Number given by the Circuit Clerk.

Plaintiff / Petitioner *(First, middle, last name)*

v.

Defendants / Respondents *(First, middle, last name, or business name)*

Case Number

In **1**, check if you are the Plaintiff/Petitioner or Defendant/Respondent.

In **2**, enter what you are asking the court for with this *Motion*.

In the lines write what you are asking the court to do, and the reasons why the judge should agree with you.

1. *Motion* by: ☐ Plaintiff/Petitioner ☐ Defendant/Respondent

2. *Motion* for: _____

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☐ I need more room to explain and I have listed additional information on the attached *Additional Motion* form.

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	*Email*
_____	
Atty # (if any)	

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.

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*

    a. To:

       Name: _____

              First   *Middle*   *Last*

       Address: _____

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

       Email address: _____

    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*

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.

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.

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

<table>
<tr><td>

In **2**, if you are sending the document 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 form.

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

2. I am sending this document:

    a. To:

       Name: _____
                First   *Middle*   *Last*

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

       Email address: _____

    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.
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          ☐ The party's lawyer
          ☐ The party's lawyer's office
        ☐ Mail or third party carrier

    c. On _____ at: _____ ☐ a.m. ☐ p.m.
        Date

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

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<tr><td>

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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.

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

_____   _____
Telephone   *Email*

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