(STALKING NO CONTACT OF	SE INFORMATI			
IN THE STATE OF ILLINOIS, (•			
COUNTY:				
County Where You Are Filing				
Enter the case information as it appears on y	your other court documents.			
PETITIONER:				
	and Last Name			
Filing on behalf of a \square minor or \square high	-risk adult:			se Number
<u> </u>	First, Middle, and Last Name			
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who you are seeking protection from. tional Case Information cont there now, or has there ever been, or	inued from the <i>Petit</i>	_		
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