

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY		ADDITIONAL PROOF OF DELIVERY (CIVIL ASSET FORFEITURE)	<i>For Court Use Only</i>
Instructions ▼ Enter above, the county name where the case was filed. Describe the property taken. Enter your name as Claimant. Enter the Case Number given by the Circuit Clerk.	State of Illinois v. _____ Description of property taken _____ Claimant (First, middle, last name)		_____ Case Number

In 1, enter the name of the court document you are sending to the other parties in the court case.

In 2, enter the lien holder's information where you are sending a copy of this form. A **lien holder** is the person or company to whom you are making your car loan payments. If there is none, leave blank.

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

1. I am sending the following Court document: _____

2. To the lien holder of the vehicle:

Name: _____
 First Middle Last

Address: _____
 Street, Apt # City State ZIP

Email Address: _____

- By: ☐ Electronically to the email address in 2:
☐ 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 2, 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 2, from a prison or jail at:

 Name of Prison or Jail

This document will be sent on:

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

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

In **3**, send copies of the document to anyone else with an interest in any of the property taken. For example, a co-owner. If there is none, leave blank.

If they have a lawyer, you **must** enter the lawyer's information.

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

3. To other people with an interest in the property:

Name: _____
 First *Middle* *Last*

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

Email Address: _____

- By:** ☐ Electronically to the email address in **3**:
 ☐ 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 **3**, 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 **3**, from a prison or jail at:

 Name of Prison or Jail

This document will be sent on:

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

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

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 by hand and print your name.

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

Under [735 ILCS 5/1-109](#) your signature means:

1) everything in this document is true and correct, or I have been informed or I believe it to be true and correct, and 2) I understand that making a false statement on this form is perjury and has penalties provided by law.

 /s/ _____
 Your Signature *Street Address*

 Print Your Name _____
 City, State, ZIP

 Telephone _____
 Email

 Firm Name (if any) _____
 Attorney # (if any)

Be sure to **check your email every day** so you do not miss important information, court dates, or documents from other parties.