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

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.	_____ **Plaintiff / Petitioner** *(First, middle, last name)*
Enter the names of the people and businesses sued as Defendants/ Respondents.	v. _____ _____
Enter the Case Number given by the Circuit Clerk.	_____ **Defendants / Respondents** *(First, middle, last name, or business name)*

_____
Case Number

In **1,** title your *Motion*. Explain in a few words what you are asking the judge to do. This should match the title you wrote in **1** on the *Notice of Court Date for Motion*.

In **2**, check if you are the Plaintiff/Petitioner or Defendant/Respondent.

1. ***Motion* to:** _____

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

3. Write what you are asking the judge to do and the reasons why the judge should agree with you:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

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

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.

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)

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

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.

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

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

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

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.

2. I am sending this document:

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.

a. To:
Name: _____
First *Middle* *Last*
Address: _____
Street, Apt # *City* *State* *ZIP*
Email address: _____

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.

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

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

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

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.

☐ I 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 that everything in the *Proof of Delivery* 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.

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.

/s/
Your Signature *Street Address*

Print Your Name *City, State, ZIP*

Telephone *Email*

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

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PRINT FORM SAVE FORM RESET FORM