



In The Circuit Court
For The Seventh Judicial Circuit of Illinois
Sangamon County, Springfield, Illinois

(Petitioner)

vs.

(Defendant)



Case No. _____

THIRTY DAY SUMMONS

To each Defendant:

YOU ARE SUMMONED and required to file an Answer to the Complaint in this case, a copy of which is hereto attached, or otherwise file your Appearance, in the Office of the Clerk of the Circuit Court, 200 South Ninth Street, Room 405, Springfield, Illinois, 62701, within 30 days after service of this Summons, not counting the day of service. IF YOU FAIL TO DO SO, A JUDGMENT BY DEFAULT MAY BE ENTERED AGAINST YOU FOR THE RELIEF ASKED IN THE COMPLAINT.

To the Officer:

This Summons must be returned by the Officer or other person to whom it was given for service, with endorsement of service and fees, if any, immediately after service. If service cannot be made, this Summons shall be returned so endorsed. This Summons may not be served later than 30 days after its date.

Name: _____
Attorney for: _____
ARDC No.: _____
Address: _____
City/State/Zip: _____
Area Code/Telephone: _____

Date

Clerk of the Court

Deputy Clerk

Date of Service: _____, 20_____
(To be inserted by Officer on copy left with Defendant or other person)

SHERIFF'S RETURN AND CERTIFICATION

I certify that I served this Summons on the Defendant as follows:
(Check appropriate box and complete information below)

- (a) (Individual Defendants - personal):
By leaving a copy and a copy of the Complaint with the individual Defendant personally.

 - (b) (Individual Defendants - abode):
By leaving a copy and a copy of the Complaint at the usual place of abode of the individual Defendant with some person of the family, of the age of 13 years or upwards; informing that person of the contents thereof and also by sending a copy of the Summons in a sealed envelope with postage fully prepaid, addressed to the individual Defendant at his or her usual place of abode.

 - (c) (Corporation Defendants):
By leaving a copy and a copy of the Complaint with its Registered Agent, or any other Officer or agent of the Defendant Corporation.

 - (d) (Other service)
-

Name of Defendant _____
Name of other person
Summons left with _____
Sex _____ Race _____ Approx. Age _____
Date of Service _____ Time _____
Date of Mailing _____

Name of Defendant _____
Name of other person
Summons left with _____
Sex _____ Race _____ Approx. Age _____
Date of Service _____ Time _____
Date of Mailing _____

SHERIFF'S FEES

Service and Return	\$ _____
Miles	\$ _____
Total	\$ _____

Sheriff of _____ County
By _____, Deputy