Enter the Case Number given by the Circuit Clerk: _____

| STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY | PROOF OF SERVICE FOR PROTECTIVE ORDERS | *For Court Use Only* |
|---|---|---|
| **Instructions**<br>Enter above the county name where the case was filed.<br>Enter your name as Petitioner.<br>Enter the name of the person you are suing as Respondent.<br>Enter the Case Number given by the Circuit Clerk. | _____<br>**Petitioner** *(First, middle, last name)*<br>v.<br>_____<br>**Respondent** *(First, middle, last name)*<br>☐ **Alias Summons** *(Check this box if this is not the 1st Summons issued for this Respondent.)* | _____<br>**Case Number** |

****Stop. Do not complete the form. The sheriff or special process server will fill in the form.****

**My name is** _____ **and I state**
*First, Middle, Last*

☐ **that I served the *Summons, Petition,* and any *Order issued in this case on the Respondent***

_____ **as follows:**
*First, Middle, Last*

☐ Personally on the Respondent:
Male ☐ Female ☐ Non-Binary ☐ Approx. Age: _____ Race: _____
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address, Unit #: _____
City, State, ZIP: _____

☐ On someone else at the Respondent's home who is at least 13 years old and is a family member or lives there:
On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address, Unit #: _____
City, State, ZIP: _____
And left it with: _____
*First, Middle, Last*
Male ☐ Female ☐ Non-Binary ☐ Approx. Age: _____ Race: _____
and by sending a copy to this Respondent in a postage-paid, sealed envelope to the above address on _____ , 20 _____ .

☐ **I was not able to serve the *Summons*, *Petition*, or any *Order* on Respondent:**

_____ .
*First, Middle, Last*

I made the following attempts to serve the *Summons, Petition,* and any *Order* issued in this case on the Respondent:

1. On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
   Address: _____
   City, State, ZIP: _____

Other information about service attempt: _____

_____

_____

_____

2. On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address: _____
City, State, ZIP: _____
Other information about service attempt: _____

_____

_____

_____

3. On this date: _____ at this time: _____ ☐ a.m. ☐ p.m.
Address: _____
City, State, ZIP: _____
Other information about service attempt: _____

_____

_____

_____

**DO NOT** complete this section. The sheriff or private process server will complete it.

**If you are a special process server, sheriff outside Illinois, or licensed private detective, your signature certifies that everything on the *Proof of Service for Protective Orders* is true and correct to the best of your knowledge. You understand that making a false statement on this form could be perjury.**

**By:**

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.

_____

*Signature by:* ☐ Sheriff
☐ Sheriff outside Illinois:

_____
*County and State*

☐ Special process server
☐ Licensed private detective

_____
*Print Name*

If *Summons* is served by licensed private detective or private detective agency:
License Number: _____



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