STATE OF LEASE AND A STATE OF	MOTION FOR DE (DIVORCE) IN THE STATE OF ILLINOIS, C		
COUNTY:			
	County Where You Are Filing the C	Case	
ν	PETITIONER: Who started the case. First, Middle, and Las	t Name	
	RESPONDENT: Who the case was filed against. First, Middle	le, and Last Name	Case Number
L	JEST TO HOLD RESPONDENT		_
These	facts are true: The Respondent received notice of		
	Being served a copy of the Sumi	mons and Petition for Divorce persond it has been more than 30 days sin	•
	Having a copy of the Summons	and <i>Petition for Divorce</i> served at R person living there, who is at least 1 ,	•
		I <i>Petition for Divorce</i> having been m It has been more than 30 _{/, Year}	
2.	As of the date of this motion, Respo	ondent has not filed an Appearance	or an <i>Answer or Response</i> in this
I ask t	he Judge to order:		
That R	espondent be held in default for their	failure to file an Appearance or an	Answer or Response.
SIGN Under <u>7</u> 3	35 ILCS 5/1-109, your signature means	s that:	
1) everyt	thing in this document is true and corr	ect, or I have been informed or I be	lieve it to be true and correct, and
-	erstand that making a false statement	, , ,	,
	filling out this form online, sign your nam	, ,, , , , , , , , , , , , , , , , , , ,	, , ,
•	r complete current address and telephone violence, you may use another address. To		
Your Signature /s/		Print Your Name	
Your Phone Number		Attorney Number (if any	
Your Em	ail (if you have one)		_
Your Add			
	Street, Apt. #	City	State Zip Code

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

I am using an alternative address because disclosing my address would put me or my household at risk.

PROOF OF DELIVERY

Fill out the information below to show how you are sending the documents, under Rule <u>11</u>, listed in A **to the other people in the case.** If a person in the case has a lawyer, **you must send the documents to their lawyer.**

I am sending this *Proof of Delivery* and the following court documents: Name of Documents To: Name: ___ Middle Last Name Address: _ Street, Apt. # State Zip Code Email Address: ___ **By:** Electronically to the email address above: \square By email (not through an EFSP). Using an approved electronic filing service provider (EFSP). I or the person I am sending the document to do not have an email address. I am sending the documents by: Mail or third-party carrier to the address above, with postage or delivery charge prepaid. Location of mailbox or third-party carrier: ___ Address or Intersection State Personal hand delivery at this address: NOTE: You can only deliver to the party, party's family member over 13 at party's residence, party's lawyer, or party's lawyer's office. Address _ Street, Apt. # State Zip Code Mail to the address above, from a prison or jail: Name of Prison or Jail This document will be sent on: Date: ______ Time: __ Month, Day, Year Include AM or PM SIGN Under 735 ILCS 5/1-109, your signature means that: 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. If you are filling out this form online, sign your name by typing it. If you are filling out this form by hand, sign and print your name. Enter your complete current address and telephone number. If you need to keep your address secret from your spouse because of domestic violence, you may use another address. That address must be one at which you can receive mail about the case. Your Signature /s/ Print Your Name _____ Your Phone Number _____ Attorney Number (if any) _____

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Zip Code

Your Email (if you have one) ______

Your Address _