## 

Petitioner's Name (person	n completing form)		
vs.			Case #(to be completed by Court)
Respondent	D.O.B.		
Address for Service			
<u>S</u>	UMMONS – FIRE	ARMS RESTRA 430 ILCS 67/1	AINING ORDER
	quired to file an answer in a located at_	this case, or otherwise	c file your appearance in the Office of the Clerk County Courthouse, , Illinois, within 7 days after the
(street address service of this summons, n		(city)	, minois, within 7 days after the
	O, A EX PARTE FIREA	RMS RESTRAININ	IG ORDER MAY BE ENTERED AGAINST
Hearing Date		Time	_a.m./p.m. Courtroom
account with an e-filing s	service provider. Visit http If you need additional h	p://efile.illinoiscourts nelp or have trouble	exemptions. To e-file, you must first create a .gov/service-providers.htm to learn more and to e-filing, visit http://www.illinoiscourts.gov/fac
To the Officer: The Officer, or other person must return this summons.			ement of service immediately following service, be returned so endorsed.
This summons ma	y not be served later than 3	30 days after its date.	
Petitioner's Attorney or Pe			
if not represented by an att	· ·	Dated	
Name Telephone Number		<u></u>	4. 6' '. 6
Address		Clerk of	the Circuit Court
City/State/Zip		Deputy (	Clerk

## **SERVICE**

( )	I certi	fy that I served this (Check appropriate						
	()	By leaving a copy	Individual Respondent – Personal By leaving a copy and a copy of the complaint with named Respondent  personally on					
	()	Individual Respondent-Abode By leaving a copy and a copy of the complaint at the usual place of abode of named Respondent with a person of his family, of the age of 13 years or upwards, informing that person of the contents and also sending a copy of the summons in a sealed envelope with postage fully prepaid, addressed to named Respondent at his usual place of abode.  Name of Respondent						
		Name of Respond	ent					
		Date of Service			Time			
		Name of Person S	ummons given to					
		Gender	Race		_Approximate Age			
		Date of Mailing _			_			
		Place of Service _						
( )	Respo	ondent not found in t	his County.					
( ) am/pn		ce by mailing notice	, postage, fully pre	e-paid on	, at			
		a	nd addressed to	date				
	Pla	ace of mailing		Respondent's na	nme	Street		
(S.Ct. F		City, State c)(3) and 12(b)(4). Servi	Zip ce is complete four da	ys after mailing)				
( )	I certi	fy that Respondent	was served while i	ncarcerated at_		·		
			Sherif	f				
			Date					