❑ Daley Center ❑ District 4
❑ District 2 ❑ District 5
❑ District 3 ❑ District 6

(Rev. 12/1/00) CCDR 0001A

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT, DOMESTIC RELATIONS DIVISION

IN RE THE ❑ MARRIAGE ❑ CUSTODY
❑ SUPPORT OF: ❑ ORDER OF PROTECTION

_____
PETITIONER

AND

_____
RESPONDENT
(SS # If known) _____

NO:

CALENDAR:

Please serve the Respondent at:

_____

_____

2120 - Summons - Retd. P.S.
2121 - Alias Summons - Retd. P.S.
2700 - Return of Service P.S. - Ord. of Protect.

2220 - Summons - Retd. N.S.
2221 - Alias Summons - Retd. N.S.
2702 - Return of Service N.S. - Ord. of Protect.

SUMMONS

TO THE RESPONDENT:

The Petitioner has filed a legal proceeding against you for one or more of the following:

❑ Dissolution of Marriage ❑ Legal Separation ❑ Declaration of Invalidity ❑ Custody ❑ Child Support
❑ Order of Protection under the Illinois Domestic Violence Act ❑ Praecipe for Summons *❑ Other: _____

YOU ARE SUMMONED and required to file your WRITTEN APPEARANCE AND RESPONSE in the Office of the Clerk of the Circuit Court Located at:

❑ Richard J. Daley Center, Room 802, Chicago, IL 60602
❑ District 2: 5600 Old Orchard Rd., Skokie, IL 60077
❑ District 3: 2121 Euclid, Rolling Meadows, IL 60008
❑ District 4: 1500 Maybrook Dr., Maywood, IL 60153
❑ District 5: 10220 S. 76th Ave., Bridgeview, IL 60455
❑ District 6: 16501 S. Kedzie Pkwy., Markham, IL 60426.

not later than ❑ 30 days ❑ 7 days after service of this summons, not counting the day of service.

IF YOU FAIL TO FILE YOUR WRITTEN APPEARANCE WITHIN THE TIME STATED ABOVE, A DEFAULT JUDGMENT MAY BE ENTERED AGAINST YOU AND THE COURT MAY GRANT THE PETITIONER ALL OR PART OF THE RELIEF THAT SHE OR HE IS REQUESTING IN HER OR HIS PETITION.

TO THE OFFICER: This summons must be returned by the officer or other person to whom it was given for service, with endorsement thereon of service and fees, if any, immediately after service. If service cannot be made, this summons shall be returned so endorsed.

WITNESS, _____, _____

_____
Circuit Court Clerk

Date of Service: _____, _____
[To be inserted by officer on copy left with respondent or other person]

Atty. Code No.: _____

Name: _____

Atty. for Petitioner: _____

Address: _____

City/State/Zip: _____

Telephone: _____

SEE REVERSE SIDE

**Service by Facsimile Transmission will be accepted at:_____
(Area Code) (Facsimile Telephone Number)

DOROTHY BROWN, CLERK OF THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS