

**IN THE CIRCUIT COURT OF THE 17<sup>th</sup> JUDICIAL CIRCUIT  
BOONE COUNTY, ILLINOIS  
Probate Division**

IN THE MATTER OF \_\_\_\_\_ )  
 )  
 )  
 )  
 Respondent )

Case Number \_\_\_\_\_

**SUMMONS FOR APPOINTMENT OF GUARDIAN  
FOR ADULT WITH DISABILITY  
NOTICE OF RIGHTS OF RESPONDENTS**

To: \_\_\_\_\_ Address: \_\_\_\_\_

You have been named as a respondent in a guardianship petition asking that you be declared a disabled person. If the Court grants the petition, a guardian will be appointed for you. A copy of the guardianship petition is attached for your convenience.

- a) **The date and time of the hearing are \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_.**
- b) The place where the hearing will occur is Room \_\_\_\_\_ of the Boone County Courthouse, located at 601 N. Main St., Belvidere 61008.

If a guardian is appointed for you, the guardian may be given the right to make all important personal decisions for you, such as where you may live, what medical treatment you may receive, what places you may visit, and who may visit you. A guardian may also be given the right to control and manage your money and other property, including your home, if you own one. You may lose the right to make these decisions for yourself.

**YOU HAVE THE FOLLOWING LEGAL RIGHTS:**

- 1) You have the right to be present at the Court hearing.
- 2) You have a right to be represented by a lawyer, either one that you retain, or one appointed by the Judge.
- 3) You have the right to ask for a jury of six persons to hear your case.
- 4) You have the right to present evidence to the Court and to confront and cross-examine witnesses.
- 5) You have the right to ask the Judge to appoint an independent expert to examine you and give an opinion about your need for a guardian.
- 6) You have the right to ask that the Court hearing be closed to the public.
- 7) You have the right to tell the Court whom you prefer to have for your guardian.

You do not have to attend the court hearing if you do not want to be there. If you do not attend, the Judge may appoint a guardian if the Judge finds that a guardian would be of benefit to you. The hearing will not be postponed or cancelled if you do not attend.

**IT IS VERY IMPORTANT THAT YOU ATTEND THE HEARING IF YOU DO NOT WANT A GUARDIAN OR IF YOU WANT SOMEONE OTHER THAN THE PERSON NAMED IN THE GUARDIANSHIP PETITION TO BE YOUR GUARDIAN. IF YOU DO NOT WANT A GUARDIAN, OR IF YOU HAVE ANY OTHER PROBLEMS, YOU SHOULD CONTACT AN ATTORNEY OR COME TO COURT AND TELL THE JUDGE.**

**E-filing is now mandatory for documents in civil cases with limited exemptions. To e-file, you must first create an account with an e-filing service provider. Visit <http://efile.illinoiscourts.gov/service-providers.htm> to learn more and to select a service provider. If you need additional help or have trouble e-filing, visit <http://www.illinoiscourts.gov/FAQ/gethelp.asp>, or talk with your local circuit clerk's office**

**TO THE OFFICER:**

This summons must be served on the alleged disabled person personally not later than fourteen (14) days before the day for appearance. The 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 and not less than three (3) days before the day for appearance. If service cannot be made on the alleged disabled person personally, this summons shall be returned so endorsed.

Witness \_\_\_\_\_, 20\_\_

Linda J. Anderson, Clerk of the Circuit Court

By: \_\_\_\_\_  
(Deputy Clerk)

STATE of ILLINOIS            )  
  ) SS  
COUNTY of BOONE            )

**AFFIDAVIT OF SERVICE**

I, \_\_\_\_\_, being first duly sworn on oath, depose and state that service of Summons for Appointment of Guardian for Disabled Person/Notice of Rights to Respondents and Petition for Appointment of Guardian for Disabled Person, the original of which is presently on file with the Clerk of the Circuit Court was made on:

\_\_\_\_\_, the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
at approximately \_\_\_\_\_ m., in the following manner:

- (a) By handing a copy thereof to the within named \_\_\_\_\_, who is M / F, race \_\_\_\_\_, of the approximate age of \_\_\_\_\_, being at the address of \_\_\_\_\_
- (b) By leaving a copy of the document with \_\_\_\_\_ at the usual place of abode of said Respondent at the following address: \_\_\_\_\_ with a person of said Respondent’s family or who regularly resides with said Respondent and who stated that he regularly resides with said Respondent, of the age of 13 years or above, who is M / F, race \_\_\_\_\_, of the approximate age of \_\_\_\_\_ years, and informing such person of the contents thereof, and also by sending through the United States mail, by depositing in the United States Post Office at \_\_\_\_\_, Illinois, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ a copy thereof, in a sealed envelope with postage fully prepaid, addressed to the Respondent at such usual place of abode.
- (c) Other Service: \_\_\_\_\_

The fee for the above service is \$ \_\_\_\_\_

\_\_\_\_\_  
Signature

SUBSCRIBED and SWORN to before me this  
\_\_\_\_\_ 20\_\_\_\_  
\_\_\_\_\_

NOTARY PUBLIC