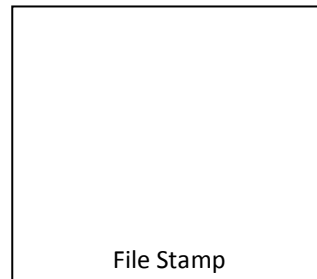


STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE 17th JUDICIAL CIRCUIT
BOONE COUNTY, ILLINOIS



Plaintiff(s)

vs.

Case No. _____

File Stamp

Defendant(s)

Amount Claimed _____

Plus Court Costs

SMALL CLAIM SUMMONS

To each Defendant: _____

Address: _____

YOU ARE HEREBY SUMMONED AND REQUIRED TO APPEAR IN PERSON on _____
at _____ in courtroom _____ of the Boone County Courthouse, 601 N. Main St., Belvidere, IL, 61008. **IF YOU FAIL TO DO SO, A JUDGMENT BY DEFAULT MAY BE TAKEN AGAINST YOU FOR THE RELIEF ASKED IN THE COMPLAINT.**

NOTICE TO THE DEFENDANT:

This case will not be heard on the day for appearance specified above.

On the day for appearance specified above, the following will occur:

- A. If you have not obeyed this Summons, a judgment may be entered against you for the relief requested in the complaint
- B. Even if you have entered your appearance or filed an Answer, you need to appear on the date set forth above.
Your case will be set at that time for trial on a future date designated by the Court. You must be present on the trial date and be prepared with any witnesses and/or evidence you want to present.

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 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. This summons may not be served later than three (3) days before the day for appearance. If service cannot be made, this summons shall be returned so endorsed. This summons may not be served later than 30 days after its issuance.

WITNESS _____

Clerk of the Circuit Court

Court Seal

By: Deputy Clerk

(Plaintiff's attorney or plaintiff if not represented by an attorney)

Name _____
Attorney for _____
Address _____
City, State, Zip _____
Telephone _____

Prepared by _____
Attorney Registration No. _____
ARDC No. _____
Email Address _____
Date of Service _____

(To be inserted by office on copy left with the employer or other persons)

SHERIFF'S FEES

Service and return \$ _____

Miles _____ \$ _____

Total Sheriff's Fees \$ _____

Sheriff of _____ County

I certify that I served this summons on defendants as follows:

(a) - INDIVIDUAL DEFENDANTS - PERSONAL:

The officer or other person making service, shall (a) identify as to sex, race and approximate age of the defendant with whom he left the summons, and (b) state the place where (whenever possible in terms of an exact street address) and the date and time of the day when the summons was left with the defendant.

(b) - INDIVIDUAL DEFENDANTS - ABODE:

By leaving a copy of the summons and a copy of the complaint at the usual place of abode of each individual defendant with a person of his family, of the age of 13 years and upwards, informing that person of the contents of the summons. The officer or other person making service, shall (a) identify as to sex, race and approximate age of the person, other than the defendant with whom he left the summons, and (b) state the place where (whenever possible in terms of an exact street address) and the date and time of day when the summons was left with such person.

and also by sending a copy of the summons and of the complaint in a sealed envelope with postage fully pre-paid, addressed to each individual defendant at his usual place of abode, as follows:

Name of Defendant	Mailing Address	Date of Mailing
_____	_____	_____
_____	_____	_____
_____	_____	_____

(c) - CORPORATION DEFENDANTS:

By leaving a copy and a copy of the complaint with the registered agent, officer or agent of each defendant corporation, as follows:

Defendant corporation	Registered agent, officer or agent	Date of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

(d) - OTHER SERVICE

_____, Sheriff of _____ County

By: _____

(Deputy)