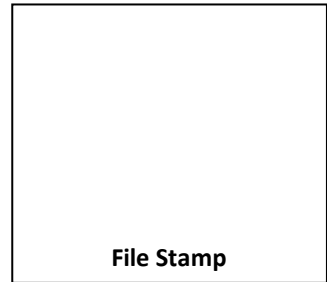


STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE 17th JUDICIAL CIRCUIT
BOONE COUNTY, ILLINOIS



Petitioner vs. _____

Case No. _____

Independent Petition

Criminal Proceeding

Dissolution

File Stamp

Respondent

SUMMONS
(Order of Protection)

To each Respondent: _____

Take notice that a Petition for **ORDER OF PROTECTION** was filed in the Circuit Court of Boone County, Belvidere, Illinois on _____.

_____ The attached **EMERGENCY ORDER OF PROTECTION WAS ENTERED**, This matter is set for hearing on the extension of the Order of protection on _____ at _____ in the Boone County Courthouse, 601 N. Main St., Belvidere, IL 61008.

_____ The **Order for Protection HAS NOT been entered**. The Petition seeking the entry of the Order of Protection is set for hearing on _____ at _____ in the Boone County Courthouse, 601 N, Main St., Belvidere, IL 61008.

YOU ARE SUMMONED AND REQUIRED TO APPEAR PERSONALLY AT THE ABOVE DATE AND TIME.

IF YOU FAIL TO DO SO, A JUDGMENT BY DEFAULT MAY BE TAKEN AGAINST YOU FOR THE RELIEF ASKED IN THE PETITION.

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. 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

By: Deputy Clerk

(Court Seal)

(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)