

**IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
STATE OF ILLINOIS
MCLEAN COUNTY**

vs. Plaintiff(s),

Defendant(s).

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}
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}
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}
}
}
}

Case Number _____
Amount Claimed \$ _____

**A FEE WILL BE DUE AT THE TIME OF
FILING AN APPEARANCE OR ANSWER
OR AS OTHERWISE DIRECTED BY THE
COURT. YOUR FILING FEE WILL BE:**
\$ _____

SMALL CLAIMS SUMMONS

To Each Defendant:

You have been named a defendant in the complaint in this case, a copy of which is hereto attached. You are summoned and required to file your appearance, in the office of the clerk of this court, within 30 days after service of this summons, not counting the day of service. If you fail to do so, a judgment by default may be entered against you for the relief asked in the complaint.

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. If you cannot e-file, you may be able to get an exemption that allows you to file in-person or by mail. Ask your circuit clerk for more information or visit www.illinoislegalaid.org.

If you are unable to pay your court fees, you can apply for a fee waiver. For information about defending yourself in a court case (including filing an appearance or fee waiver), or to apply for free legal help, go to www.illinoislegalaid.org. You can also ask your local circuit clerk's office for a fee waiver application.

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 date.

(Seal)

Witness _____

_____ Date

Clerk of Court

Deputy Clerk

(Plaintiff's Attorney or Plaintiff if self-represented)

REQUIRED

Attorney Name: _____

ARDC #: _____

Address: _____

City, State, Zip Code: _____

Telephone: _____

Email: _____