

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT

_____ COUNTY

vs.

No. _____

SUMMONS IN ADMINISTRATIVE REVIEW

To the defendant:

YOU ARE SUMMONED and required to file an answer in this case or otherwise file your appearance in the office of the clerk of this court in _____ (Room No.) _____ (Address) _____, Illinois, (City)

within 35 days after the date of this summons.

WITNESS, _____, _____

(Seal of court)

(Clerk of the Circuit Court)

Name _____

Attorney for _____

Address _____

City _____

Telephone _____

CERTIFICATE OF MAILING

On _____, _____, I sent by registered mail a copy of this summons to each defendant addressed as follows:

Defendant

Address

Table with 2 columns: Defendant, Address. Multiple rows for listing recipients.

Dated _____, _____

(Seal of court)

(Clerk of the Circuit Court)

SHERIFF'S FEES

{	Service and return	\$ _____
	Miles _____	\$ _____
	Total	\$ _____

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 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 or 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 prepaid, 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)