This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts.

STATE OF ILLINOIS, CIRCUIT COURT _____ COUNTY	AFFIDAVIT FOR SERVICE BY POSTING	For Court Use Only

Instructions ▼	
Directly above, enter the name of county where you will file the case.	**Plaintiff** ***(For example, the landlord or owner)*:**
Enter your name as Plaintiff.	_____
Below "Defendants," enter the names of the people you are trying to evict.	v. **Defendants** ***(First, middle, last name)*:**
The sheriff will only evict unknown occupants if the "Unknown Occupants" box is checked.	☐ **Unknown Occupants** *(Check this box only if you checked Unknown Occupants on the Eviction Complaint and Eviction Summons.)*
Enter the case number given by the Circuit Clerk.	_____ **Case Number**

NOTE: **Before you use this form, the sheriff or special process server must try to serve the Defendant and return the *Eviction Summons* saying they could not be served under 735 ILCS 5/9-107.**

In **1**, enter the name of the Defendant who the sheriff or special process server has been unable to serve.

1. I have been unable to serve _____ (*Name of Defendant*) with the *Eviction Summons*.

The sheriff or special process server attempted to serve the Defendant but returned the *Eviction Summons* saying the Defendant could not be served.

In **2**, check the reason why the Defendant cannot be served personally or by substitute service.

2. I believe the Defendant cannot be served personally or by substitute service *(serving a household member)* because (*check one of the following*):

- ☐ The Defendant lives outside of Illinois;
- ☐ The Defendant has gone outside of Illinois;
- ☐ I know the Defendant is in Illinois but I cannot find them; OR
- ☐ I cannot find the Defendant after trying my best.

Under the Code of Civil Procedure, 735 ILCS 5/1-109, making a statement on this form that you know to be false is perjury, a Class 3 Felony.

3. Defendant's last known address is:

_____
Street Address, Unit # *City* *State* *ZIP*

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

I certify that everything in the *Affidavit for Service by Posting* is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under 735 ILCS 5/1-109.

Enter your complete address, telephone number, and email address, if you have one.

/s/	
Your Signature	*Street Address*
Print Your Name	*City, State, ZIP*
Telephone	*Email*

GETTING COURT DOCUMENTS BY EMAIL: You should use an email account that you do not share with anyone else and that you check every day. If you do not check your email every day, you may miss important information, notice of court dates, or documents from other parties.

PRINT FORM SAVE FORM RESET FORM