

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT

_____ COUNTY

_____ ,)	
)	
)	
Plaintiff,)	
vs.)	Case No. _____
)	
_____ ,)	
)	
Defendant.)	

MOTION TO RECONSIDER ORDER OR JUDGMENT

I, _____ , on oath state that:

1. I am the _____ in this action
2. That on _____, 20____, a judgment was entered against me (copy attached).
3. The judgment was in error and the judge should reconsider their decision because:

4. I have attached an Affidavit in to this Motion which explains the facts supporting this request.

WHEREFORE, I ask that the judge should reconsider their decision, and for such other releif that the court deems equitable and proper

Date: _____, 20____

Signature

Under the penalties as provided by law pursuant to Section 5/1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that they verily believe the same to be true.

Signature

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT

_____ COUNTY

_____,)
 _____,)
 Plaintiff,)
 vs.)
 _____,)
 Defendant.)

Case No. _____

AFFIDAVIT

I, _____, on oath state that:

1. I am the _____ in this action.
2. That the following facts are true to the best of my belief or knowledge.

- A. _____

- B. _____

- C. _____

- D. _____

Signature

Signed and sworn to before me on _____, 20__

Notary Public - Clerk