
Your Name

City, State, ZIP

Telephone

Email

PROOF OF DELIVERY (you must provide a copy of this motion to each party in the case; if there is more than one other party, you will need to complete a separate proof of service for each party)

1. I am sending the motion

a. To:

Name: _____

Address: _____

Email Address: _____

b. By:

an approved electronic filing service provider (EFSP)

Email (not through an EFSP)

Only use one of the methods below if you do not have an email address, or the person you are sending the document to does not have an email address

Personal hand delivery to:

the party

the party's family member who is 13 or older, at the party's residence

the party's lawyer

The party's lawyer's office

Mail or third-party carrier

c. On: _____ at: _____ a.m. p.m.
Date Time

I certify that everything in the proof of delivery 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.

Your Signature

Street Address

Your Name

City, State, ZIP

Telephone

Email