

Enter the Case Number given by the Appellate Court Clerk: 1-18-0572

- 2nd vehicle worth: \$ _____ The 2nd vehicle is paid Yes No
 Other (list items and value): _____ \$ _____
 None of the above

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.

The person who filled out this form must sign it. If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign by hand and print your name.

If you are filling out this form for a minor or an incompetent adult, state your relationship.

I certify that everything in the *Application for Waiver of Court Fees (Appellate Court)* 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](#).

/s/ _____ Street Address
Your Signature

Print Your Name

Relationship to Minor or Incompetent Adult (if applicable) Telephone

GETTING COURT DOCUMENTS BY EMAIL: If you agree to receive court documents by email, check the box below and enter your email address. 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 or notice of court dates. Other parties may still send you court documents by mail.

- I agree to receive court documents at this email address during my entire case.

Email

PROOF OF SERVICE

In 1a, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.

In 1b, check the box to show how you sent the document, and fill in any other information required on the blank lines.

CAUTION: If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court document.

1. I sent this document:

a. To:

Name: _____
First Middle Last
Address: _____
Street, Apt # City State ZIP
Email address: _____

- b. By: Personal hand delivery
 Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

Address of Post Office or Mailbox

- Third-party commercial carrier, with delivery paid for at:

Name (for example, FedEx or UPS) and office address

Enter the Case Number given by the Appellate Court Clerk: 1-18-0572

- The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)
- Email (not through an EFM or EFSP)
- Mail from a prison or jail at:

Name of prison or jail

In c, fill in the date and time that you sent the document.

c. On: _____
Date

At: _____ a.m. p.m.
Time

In 2, if you sent the document to more than 1 party or lawyer, fill in a, b, and c. Otherwise leave 2 blank.

2. I sent this document:

a. To:

Name: _____
First Middle Last

Address: _____
Street, Apt # City State ZIP

Email address: _____

- b. By: Personal hand delivery
- Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

Address of Post Office or Mailbox

- Third-party commercial carrier, with delivery paid for at:

Name (for example, FedEx or UPS) and office address

- The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)
- Email (not through an EFM or EFSP)
- Mail from a prison or jail at:

Name of prison or jail

c. On: _____
Date

At: _____ a.m. p.m.
Time

In 3, if you sent the document to more than 2 parties or lawyers, fill in a, b, and c. Otherwise leave 3 blank.

3. I sent this document:

a. To:

Name: _____
First Middle Last

Address: _____
Street, Apt # City State ZIP

Email address: _____

Enter the Case Number given by the Appellate Court Clerk:

- b. By: Personal hand delivery
 Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

Address of Post Office or Mailbox

- Third-party commercial carrier, with delivery paid for at:

Name (for example, FedEx or UPS) and office address

- The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)
 Email (not through an EFM or EFSP)
 Mail from a prison or jail at:

Name of prison or jail

- c. On:
Date

At: a.m. p.m.
Time

If you are serving more than 3 parties or lawyers, fill out and insert 1 or more *Additional Proof of Service* forms after this page.

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.

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

I certify that everything in the Proof of Service 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](#).

/s/
Your Signature

Print Your Name