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

Instructions ▼	
Make this cover page light yellow.	☐ **THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER RULE 311(a).**
Check the box to the right if your case involves custody, visitation, or removal of a child.	
Enter the Appellate Court case number.	**Appellate Case No.:** _____
Just below "In the Appellate Court of Illinois," enter the number of the appellate district where the appeal was filed.	**IN THE APPELLATE COURT OF ILLINOIS** _____ **District**
If the case name in the trial court began with "In re" (for example, "In re Marriage of Jones"), enter that name. Below that, enter the names of the parties in the trial court, and check the correct boxes to show which party filed the appeal ("appellant") and which party is responding to the appeal ("appellee").	**In re** _____ _____ **Plaintiff/Petitioner** *(First, middle, last names)* ☐ **Appellant** ☐ **Appellee** v. _____ **Defendant/Respondent** *(First, middle, last names)* ☐ **Appellant** ☐ **Appellee**
To the far right, enter the trial court county, trial court case number, and trial judge's name.	**Appeal from the Circuit Court of** _____ **County** **Trial Court Case No.:** _____ **Honorable** _____ **Judge, Presiding**

PETITION FOR REHEARING

Add your:
1) Name;
2) Address;
3) Phone number; and
4) Email address.

NOTE: insert your email address only if you agree to receive court documents by email.

Your Information

Name: _____
First *Middle* *Last*

Address: _____
Street, Apt # *City* *State* *ZIP*

Phone: _____

Email: _____

Enter the Case Number given by the Appellate Court Clerk: _____

ARGUMENT

[Refer to Illinois Supreme Court Rule 367(b)]

Briefly state the 1st point that the appellate court overlooked or misunderstood.

1. The appellate court overlooked or misunderstood the fact that _____

Do not repeat your original argument. Instead, explain why the appellate court's decision was wrong. To help you do this, use authorities (cases, statutes (laws), etc.) and references to the pages of the record. Refer to pages of the common law record as "C [page]." Refer to pages of the report of proceedings as "R [page]."

Starting with this page, number the pages of your petition 1, 2, 3, etc. (This page is numbered for you.)

Briefly state the 2nd point that the appellate court overlooked or misunderstood.

If you don't have a 2nd point, remove this page and the following argument pages.

2. The appellate court overlooked or misunderstood the fact that _____

Do not repeat your original argument. Instead, explain why the appellate court's decision was wrong. To help you do this, use authorities (cases, statutes (laws), etc.) and references to the pages of the record. Refer to pages of the common law record as "C [page]." Refer to pages of the report of proceedings as "R [page]."

Briefly state the 3rd point that the appellate court overlooked or misunderstood.

If you don't have a 3rd point, remove this page and the following argument pages.

3. The appellate court overlooked or misunderstood the fact that _____

Do not repeat your original argument. Instead, explain why the appellate court's decision was wrong. To help you do this, use authorities (cases, statutes (laws), etc.) and references to the pages of the record. Refer to pages of the common law record as "C [page]." Refer to pages of the report of proceedings as "R [page]."

Enter the Case Number given by the Appellate Court Clerk: _____

Rule 341(a) governs the form of a *Petition for Rehearing*, and Rule 367(a) governs the length. Unless a motion to file a longer *Petition for Rehearing* is granted, the *Petition for Rehearing* (not counting the pages listed) must be no more than 27 pages OR no more than 8,100 words.

If your *Petition for Rehearing* is within the page limit, add the number of pages in your *Petition for Rehearing* (not counting the pages listed).

If your *Petition for Rehearing* is not within the page limit, but is within the word limit, add the number of words in your *Petition for Rehearing* (not counting the pages listed).

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.

CERTIFICATE OF COMPLIANCE

[Refer to Illinois Supreme Court Rule 341(c)]

I certify that this *Petition for Rehearing* conforms to the requirements of Supreme Court Rules 341(a) and 367(a). The length of this *Petition for Rehearing*, excluding the pages or words contained in the Rule 341(d) cover, the Rule 341(c) certificate of compliance, and the certificate of service, is _____ pages or words.

/s/ _____
Signature

_____
Print Name

Enter the Case Number given by the Appellate Court Clerk: _____

PROOF OF SERVICE

[Refer to Illinois Supreme Court Rule 11]

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

   ☐ 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: _____

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

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☐ 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

Print Form Save Form Reset Form