

<b>STATE OF ILLINOIS, CIRCUIT COURT</b>  _____ COUNTY	<b>CERTIFICATION FOR EXEMPTION FROM E-FILING</b>	<i>For Court Use Only</i>
<b>Instructions ▼</b> Directly above, enter the name of the county where the case was filed. <hr/> Enter the name of the person who started the lawsuit as Plaintiff/Petitioner. <hr/> Enter the name of the person being sued as Defendant/Respondent. <hr/> Enter the Case Number given by the Circuit Clerk or leave this blank if you do not have one.	_____ <b>Plaintiff / Petitioner</b> <i>(First, middle, last name)</i>  v.  _____ <b>Defendant / Respondent</b> <i>(First, middle, last name)</i>	_____ <b>Case Number</b>

In 1, check the reasons you are asking to file by mail or in person. You should check all that apply.

**1. I am not able to e-file documents in this case for the following reasons** *(check all that apply)* :

- I am representing myself and do not have the Internet or a computer in my home. My only access is through a public terminal at a courthouse, library, or other location. This poses a financial or other hardship.
- I am representing myself and have a disability that prevents me from e-filing.
- I am representing myself and have trouble reading, writing, or speaking in English.
- I am filing a document in a sensitive case, such as a petition for an order of protection or a civil no contact/stalking order.

**2. Illinois Supreme Court Rule 9(c)(4) allows for an exemption from e-filing for good cause. For the above reasons, I need a good cause exemption from e-filing for my entire case or until I am able to e-file.**

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.

After you finish this form, sign and print your name.

Enter your complete address and telephone number.

**I certify that everything in the *Certification for Exemption from E-filing* 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*

\_\_\_\_\_  
*Print Your Name*

\_\_\_\_\_  
*City, State, ZIP*

\_\_\_\_\_  
*Telephone*