Instructions -	THIS APPEAL INVOLVES A MATTER SUBJECT TO EXPEDITED DISPOSITION UNDER				
Check the box to the right if your case involves parental responsibility or parenting time (custody/visitation rights) or relocation of a child.	RULE 311(a). Appellate Case No.:				
Enter the appellate court case number.	IN THE APPELLATE COUR ILLINOIS	TOF			
Just below "In the Appellate Court of Illinois," enter the number of the		_ District			
appellate district where the appeal was filed.	In re	Appeal from the Circuit Court of County			
If the case name in the trial court began with "In re" (for example, "In re Marriage of Jones"), enter that phrase. If the case	Plaintiff/Petitioner (First, middle, last names)	Trial Court Case No.:			
name did not begin with "In re," enter the names of the parties as	Appellant Appellee	Honorable			
they appeared in the trial court documents. Below each party name check either Appellant if the party	ν.	Judge, Presiding			
filed the appeal or Appellee if the party is responding to the appeal.	Defendant/Respondent (First, middle, last names)				
To the far right, enter the trial court county, trial court case number, and trial judge's name.	Appellant Appellee				

AGREED STATEMENT OF FACTS

1. Dates of Hearing or Trial:

a.	Date:	Time:	a.m.	p.m.	Judge:	
b.	Date:	_ Time:	_ 🗌 a.m.	p.m.	Judge:	
c.	Date:	Time:	_ 🗌 a.m.	p.m.	Judge:	
d.	Date:	_ Time:	a.m.	p.m.	Judge:	
e.	Date:	_ Time:	a.m.	p.m.	Judge:	
f.	Date:	_ Time:	a.m.	p.m.	Judge:	
g.	Date:	Time:	a.m.	p.m.	Judge:	

In 2, describe exactly what the judge, the parties, the witnesses, and the lawyers said or did in court during the hearings or trial, including any rulings the judge made. Be sure to include the date of each hearing. Use as much detail as you can. It is best to describe things in the order that they happened.

2. This is what happened in my case, starting with the first hearing listed above and

ending with the final ruling made by the judge. Specifically:

If you need more room,
check the box and fill
out an Additional
Agreed Statement of
Facts Information
form. Insert it after this
page.

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I have completed an Additional Agreed Statement of Facts Information form.

After you finish this form, all parties and their lawyers must sign and print their names.	/s/ Signature of Appellant or Appellant's Lawyer	Street Address
Enter the addresses and telephone numbers of everyone signing this form.	Name	City, State, ZIP Telephone
F		
If you are completing this form on a computer, sign your name by typing it. If you are completing it	Signature of Appellee or Appellee's Lawyer	Street Address
by hand, sign by hand and print your name.	Name	City, State, ZIP
		Telephone
If need room for more signatures, check the box and fill out an <i>Additional Signature</i> form. Insert it after this page.	☐ I have completed an <i>Additional Signature</i> form.	

PROOF OF SERVICE (You must serve the other party and complete this section)

In 1a , enter the name, mailing address, and email address of the party or lawyer to	1.	l se a.	nt this doc To:	ument:				
whom you sent the			Name:					
document.				First		Middle		Last
			Address:					
				Street, Apt #		City	State	ZIP
I			Email add	dress:			_	
In 1b , check the box to show how you sent the document, and fill in any other information		b.	By:	Personal hand delivery Regular, First-Class Mail, put into the U.S. Mail with postage paid at:				
required on the blank lines.				Address of Post (Third-party com			ery paid for at:	
CAUTION: If the other party does not				Name (for example, FedEx or UPS) and office address				
have a lawyer, you may								d electronic filing
send the document by					•	nanayei (Er		
email only if the other party has listed their				service provider	. ,			
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Enter the Case Number given by the Appellate Court Clerk:_

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

If you are serving more than 3 parties or lawyers, check the box and fill out an *Additional Proof of Service* form. Insert it

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a statement on this form that you know to be false is perjury, a Class 3 Felony.

Civil Procedure, 735

<u>ILCS 5/1-109</u>, making

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 sent this document:

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	Email add								
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		service provider (EFSP)							
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C.	On: Da	te							
	At:	ne a.m.	□ p.m.						
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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 <u>735 ILCS 5/1-109</u>.

Your Signature

/s/

Print Your Name