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

STATE OF ILLINOIS, CIRCUIT COURT		APPEARANCE		For Court Use Only	
	_ COUNTY	Pro	5e		
Instructions ▼					
Directly above, enter the name of the county where the case was filed.					
Enter the name of the person or company that filed this case as Plaintiff/Petitioner.	Plaintiff / Petit				
Enter the name of the Defendant/Respondent.					
Enter the Case Number given by the Circuit Clerk.	Defendant / Ro	espondent (First, middle, la	Case Number		
In 1, enter your full name.	1. I,	Middle	Last	enter my appearance in this case.	
In 2, check only one box to ask for a trial with only a judge or a trial with a judge and jury. You do not have a right to a jury trial in every case.	☐ a judo	i ke a trial with: ge ge and jury			
Under the Code of Civil Procedure, 735 ILCS 5/1-109, making a statement on this form that you	-			nderstand that making a false ovided by law under 735 ILCS5/1-109.	
know to be false is perjury, a Class 3 Felony. If you are completing this form on a	Your Signatur	е	Street	Address	
computer, sign your name by typing it. If you are completing it by hand, sign and	Your Name		City, S	itate, ZIP	
Enter your complete address and telephone number.	Telephone				
address. You should use	an email account tha	at you do not share with anyon	e else and that you chec	nail, check the box below and enter your email ck every day. If you do not check your email and you court documents by mail.	
	☐ I agree to	receive court documents	at this email addre	ess during my entire case.	

AP-P 503.5 Page 1 of 3 (01/18)

Email

PROOF OF DELIVERY

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.

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

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

1.	l se	I sent this document:								
	a.	To: Name:								
		rianio.	First	Middle	Last					
		Address:					710			
		Enail and	Street, Apt #		City	State	ZIP			
		Email ad	aress:							
	b.	Ву:	Personal hand delivery Regular, First-Class Mail, put into the U.S. Mail with postage paid at:							
			Address of Post O	ffice or Mailbox						
			Third-party comm	mercial carrier, with de	elivery paid for a	at:				
			Name (for example, FedEx or UPS) and office address							
			roved electronic	ed electronic filing						
			service provider (EFSP)							
			Email (not through	Email (not through an EFM or EFSP)						
			Mail from a priso	n or jail at:						
			Name of prison or	jail						
	c.	On:								
		At:	Date ☐ a.m. ☐ p.m.							
		Tim		р						
2.	l se	ent this do	cument:							
	a.	To:								
		Name:								
			First	Middle		Last				
		Address:	Street, Apt #		City	State	ZIP			
		Email ad			Only .	Oldio				
	b.	By: ∐	Personal hand de	•	LO MAIL III					
		Regular, First-Class Mail, put into the U.S. Mail with postage paid a								
		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 electro								
			service provider	(EFSP)						
			Email (not through	h an EFM or EFSP)						
			Mail from a priso	n or jail at:						

Name of prison or jail

	C.	On: Date At: Tim	a	ı.m. 🗌 p.ı	m.				
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. Is	ent this do To: Name:			M. dalla				
		Address: Email ad	Street, Apt #		Middle 	City	Last State	ZIP	
	b.	Ву: 🗌	Personal hand d Regular, First-Cl	-	t into the U.S	. Mail with p	ostage 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:								
If you sent your document to more than 3 parties or lawyers, check the box and file <i>Additional Proof of Delivery</i> with this form.	c.	On:	□ a	ı.m.					
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	a false 735 IL	e statemen <u>.CS 5/1-1(</u>	rything in the Pro It on this form is <mark>09</mark> .		has penaltie	es provided		at making	
Felony. If you are completing	Your S	Signature			Street Add	dress			
this form on a computer, sign your name by typing it. If you are completing it	Print Your Name			City, State, ZIP					
by hand, sign and print your name.	Teleph	one							

Enter the Case Number given by the Circuit Clerk: ___