CIRCUIT COURT OF ILLINOIS TWENTY THIRD JUDICIAL CIRCUIT KENDALL COUNTY

Petitioner's Name (person	on completing form)			
vs.		Case # (to be completed by Court)		
Respondent	D.O.B.			
Address for Service				
<u> </u>	SUMMONS – FIRE	ARMS RESTRA 430 ILCS 67/1	AINING ORDER	
of this Court, Room	equired to file an answer in	this case, or otherwise the Kendall County C	e file your appearance in the Office of the Clerk Courthouse, located at 807 West John Street, unting the day of service.	
	SO, AN EX PARTE FIRE THE RELIEF ASKED IN		ING ORDER MAY BE ENTERED	
Hearing Date		Time	a.m./p.m. Courtroom	
account with an e-filing select a service provider	service provider. Visit htt	p://efile.illinoiscourts help or have trouble	exemptions. To e-file, you must first create are s.gov/service-providers.htm to learn more and to e-filing, visit http://www.illinoiscourts.gov/faq.	
	on to whom it was given for a. If service cannot be made		ement of service immediately following service, be returned so endorsed.	
This summons ma	ay not be served later than 3	30 days after its date.		
Petitioner's Attorney or F	Petitioner			
if not represented by an a		Dated		
Name				
Telephone Number		Clerk of	the Circuit Court	
AddressCity/State/Zip			Q1 1	
Email		Deputy (Clerk	

SERVICE

()	I certi	rtify that I served this summons on Respondent as follows: (Check appropriate box, and complete information below.)				
	()	Individual Respondent – Personal By leaving a copy and a copy of the complaint with named Respondent personally on				
	Individual Respondent-Abode By leaving a copy and a copy of the complaint at the usual place of abode of named Respondent with a person of his family, of the age of 13 years or upward informing that person of the contents and also sending a copy of the summons in sealed envelope with postage fully prepaid, addressed to named Respondent at h usual place of abode.					
		Name of Respondent				
		Date of Service		_Time		
		Name of Person Summons giv	en to			
		GenderRace		_Approximate Age		
		Date of Mailing		_		
		Place of Service				
()	Respo	ndent not found in this County.				
() Service by mailing notice, postage, fully pre-paid on, at						
date						
	Pla	and addressed ce of mailing	Respondent's nar	ne Street		
(S.Ct. l		City, State Zip)(3) and 12(b)(4). Service is complete	four days after mailing)			
()	I certi	fy that Respondent was served v	while incarcerated at_	<u>.</u> .		
			Sheriff			
By Deputy						
		,	Date			