

STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE 17TH JUDICIAL CIRCUIT
WINNEBAGO COUNTY

FILE STAMP

Plaintiff

vs.

Case No.

Defendant

Service to be made

to:

SUMMONS

TO THE DEFENDANT

YOU ARE HEREBY SUMMONED and required to file an Answer to the complaint in this case, a copy of which is hereto attached, or otherwise file your Appearance in the Office of the Clerk of this Court, Winnebago County Courthouse, 400 West State St., room 108, Rockford, Illinois, within 30 days after service of this summons, not counting the day of service.

IF YOU FAIL TO DO SO, A JUDGMENT BY DEFAULT MAY BE ENTERED AGAINST YOU FOR THE RELIEF ASKED FOR IN THE COMPLAINT.

THIS CASE IS SET FOR A CASE MANAGEMENT CONFERENCE IN COURTROOM ON AT : .M. FAILURE TO APPEAR MAY RESULT IN THE CASE BEING DISMISSED OR AN ORDER OF DEFAULT BEING ENTERED.

TO THE OFFICER:

This summons must be returned by the officer or other person to whom it was given for service, with endorsement of service and fees, if any, immediately after service. If service cannot be made, this summons shall be returned so endorsed.

This summons may not be served later than thirty (30) days after its issuance.

(Seal of Court)

Witness. , 20

Clerk of the Circuit Court

By:

Plaintiff's Attorney or Plaintiff,

Name:

Attorney for:

Address:

City/State/Zip:

Telephone No:

Date of Service , 20

(To be inserted by officer on copy left with defendant or other person)

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IN THE CIRCUIT COURT OF THE 17<sup>TH</sup> JUDICIAL CIRCUIT  
WINNEBAGO COUNTY

FILE STAMP

\_\_\_\_\_  
Plaintiff

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Clerk of the Circuit Court

By: \_\_\_\_\_

Plaintiff's Attorney or Plaintiff,

Name: \_\_\_\_\_

Attorney for: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone No: \_\_\_\_\_

Date of Service \_\_\_\_\_, 20\_\_\_\_\_

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