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

## Request for Release of Adoption Records

Pursuant to 750 ILCS 50/18 all adoption records shall be opened for examination only upon a specific order of the court. Certified copies within the file shall also be made only by order of the court.

| Record(s) re  | quested:   |                |                       |                            |
|---|--|----------------|-----------------------|----------------------------|
| Reason (attao   | ch additional pa   | ges if necessa | ry):                  |                            |
|   |  |                |                       |                            |
| Names of adop<br>Names of birth                           | oting parents:<br>n parents (if kno  | wn):           |                       | Minor being adopted        |
| Case number (   | use number (if known): Ad  |                |                       | minor's date of birth:     |
| I PREFER TO   | RECEIVE THE  | E DOCUMEN      | NTS BY:               |                            |
| E-Mail (to address below) Regular Mail (to address below) |  |                |                       |                            |
| Pick up fr  | om Clerk's Offic   | e              |                       |                            |
| Requester's Sig   | nature:  |                |                       | Date:                      |
|   |  |                |                       |                            |
|   |  |                |                       |                            |
|   | Sta  |                |                       |                            |
|   |  |                |                       |                            |
|   |  |                |                       |                            |
|   |  |                |                       |                            |
|   |  |                | ORDER                 |                            |
| IT IS HEREBY  | ORDERED TH   | IAT the abov   | ve request for releas | se of adoption records is: |
| Denied  | Correspondence sent with other sources for information.  |                |                       |                            |
| Approved  | oved Records shall be released to the Requester and sent as indicated above, with proper identification. |                |                       |                            |
|   |  | Ent            | er:                   |                            |
| Dated:  |  |                |                       |                            |
| Please return con   |  |                |                       |                            |
|   |  |                | 1 1 4 4 D 21          | =                          |

Winnebago County Courthouse, Trial Court Administration, Room 215, 400 West State Street, Rockford, Illinois 61101-1221 Krohrer@17thcircuit.illinoiscourts.gov