

**SUMMONS  
ILLINOIS DOMESTIC VIOLENCE ACT  
IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT  
ROCK ISLAND COUNTY, ILLINOIS**

\_\_\_\_\_  
**Petitioner**

No. \_\_\_\_\_

V.

- Independent Petition**  
 **Criminal Proceedings**  
 **Dissolution**

\_\_\_\_\_  
**Respondent**

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

**To each respondent:**

You are summoned and required to file an answer in this case, or otherwise file your appearance in the:

**Office of the Circuit Clerk  
COURTHOUSE Building  
210-15<sup>th</sup> STREET  
ROCK ISLAND, Illinois**

**within 7 days after service of this summons, not counting the day of service.**

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

**To the officer:**

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

This summons may not be served later than 30 days after its date.

**WITNESS** \_\_\_\_\_, 20\_\_\_\_

**(Seal of Court)**

\_\_\_\_\_  
**Clerk of the Circuit Court**

**By:** \_\_\_\_\_  
**Deputy**

\_\_\_\_\_  
**(Signature of Attorney or Signature of Petitioner, if not represented)**

**Petitioner's Name** \_\_\_\_\_

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

**City:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**SUMMONS IL DOM.ACT  
Revised 07/2006**

**SHERIFF'S FEES**

**SERVICE AND/OR RETURN**.....\$ \_\_\_\_\_  
**MILEAGE**.....\$ \_\_\_\_\_  
**TOTAL**.....\$ \_\_\_\_\_

I Certify that I served this Summons as directed as follows:  
(Check appropriate box, and complete information below)

(a)-(Individual-personal):  
By leaving a certified copy of this Summons with each below-named individual personally.

(b)-(Individual-abode)  
By leaving a certified copy of this Summons at the usual place of abode of each below-named Individual with a person of his family or a person residing there, of the age of 13 years or upward, informing that person of the contents and also by sending a copy of the Summons in a Sealed envelope with postage fully prepaid, addressed to each such individual at his usual Place of abode.

**Name of Person**  
**Summons given to** \_\_\_\_\_  
**Sex** \_\_\_\_\_ **Race** \_\_\_\_\_ **Approx Age** \_\_\_\_\_  
**Place of Service** \_\_\_\_\_

**Name of Person**  
**Summons given to** \_\_\_\_\_  
**Sex** \_\_\_\_\_ **Race** \_\_\_\_\_ **Approx Age** \_\_\_\_\_  
**Place of Service** \_\_\_\_\_

**Date of Service** \_\_\_\_\_ **Time** \_\_\_\_\_

**Date of Service** \_\_\_\_\_ **Time** \_\_\_\_\_

**Date of Mailing** \_\_\_\_\_

**Date of Mailing** \_\_\_\_\_

**By** \_\_\_\_\_ **Deputy**

**By** \_\_\_\_\_ **Deputy**

(c)-(Not found):

The within named \_\_\_\_\_ not found in this

County this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,

**REASON:** \_\_\_\_\_,

**By** \_\_\_\_\_, **Deputy** \_\_\_\_\_

**Sheriff of** \_\_\_\_\_ **County.**

**ORDER RETURN**