

**STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE 17TH JUDICIAL CIRCUIT**

_____ COUNTY, ILLINOIS

)	
)	
)	
Plaintiff)	
)	NO. _____
Vs.)	
)	
)	
)	
Defendant)	

APPEARANCE

The undersigned, as attorney, enters the appearance of defendant

(Appearance must be signed by the responsible attorney or individual)

Filing Space

Name _____

Attorney for _____

Address _____

City _____

Telephone _____