

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS

MUNICIPAL DEPARTMENT, _____ MUNICIPAL DISTRICT

| | | | |
|----|--------------|--|----------------|
| | Plaintiff(s) | | Case No. _____ |
| v. | | | |
| | Defendant(s) | | |

COMPLAINT

The Plaintiff(s) claim(s) as follows:

Address for Service: _____

Attorney for Plaintiff

City: _____

State: ____ Zip: _____

Telephone: _____

Primary Email: _____

NOTE

If there is not sufficient space on this page for the entire statement of claim, the balance, together with signature, may be put upon the back page.