

**UNITED STATES OF AMERICA
STATE OF ILLINOIS COUNTY OF LASALLE
IN THE CIRCUIT COURT OF THE 13TH JUDICIAL CIRCUIT**

vs.

Case No. _____

SUMMONS

Residential Foreclosure Mediation

TO THE DEFENDANT:

YOU ARE HEREBY SUMMONED and required to file an answer in this case, or otherwise file your appearance, in the office of the Clerk of this Court, LaSalle County Courthouse, 119 W. Madison Street, Room 200, Ottawa, IL, within 30 days after service of this summons, not counting the day of service. **IF YOU FAIL TO DO SO, A JUDGMENT OR DECREE BY DEFAULT MAY BE TAKEN AGAINST YOU FOR THE RELIEF ASKED IN THE COMPLAINT.**

E-filing is now mandatory for documents in civil cases with limited exemptions. To e-file, you must first create an account with an e-filing service provider. Visit <http://efile.illinoiscourts.gov/service-providers.htm> to learn more and to select a service provider. If you need additional help or have trouble e-filing, visit <http://www.illinoiscourts.gov/FAQ/gethelp.asp> or talk with your local Circuit Clerk's office.

YOU MAY STILL BE ABLE TO SAVE YOUR HOME. DO NOT IGNORE THIS DOCUMENT.

By order of the Chief Judge of the Circuit Court of the Thirteenth Judicial Circuit, this case is set for Mandatory Mediation on _____, 20____, at _____ at the LaSalle County Courthouse, 119 W. Madison Street, Ottawa, IL 61350. A lender representative will be present along with a court appointed mediator to discuss options that you may have and to pre-screen you for potential mortgage modification. For further information on the mediation process, please see the attached **NOTICE OF MANDATORY MEDIATION**.

**YOU MUST APPEAR ON THE MEDIATION DATE GIVEN,
OR YOUR RIGHT TO MEDIATION WILL TERMINATE.**

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 30 days after its date.

Witness, _____, _____

Name _____
Attorney for _____
Address _____
City _____
Telephone _____

Clerk of Court
(Seal of Court)

Date of Service _____, _____

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

SHERIFF'S FEES

Service and return..... \$ _____

Miles _____

Total..... \$ _____

Sheriff of _____ County

I certify that I served this summons on defendants as follows:

(Check appropriate box, and complete information below)

(a)--Individual defendants--personal):
By leaving a copy and a copy of the complaint with each individual defendant personally.

(b)--(Individual defendants--abode):
By leaving a copy and a copy of the complaint at the usual place of abode of each individual defendant with a person of the family or a person residing there, of the age 13 years or upwards, 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 individual defendant at his/her usual place of abode.

(c)--(Corporation defendants):
By leaving a copy and a copy of the complaint with the registered agent, officer or agent of each defendant corporation.

(d)--(Other service):

Name of Defendant _____

Name of Defendant _____

Name of Person
Summons Given to _____

Name of Person
Summons Given to _____

Sex _____ Race _____ Approx. Age _____

Sex _____ Race _____ Approx. Age _____

Place of Service _____

Place of Service _____

Date of Service _____ Time _____

Date of Service _____ Time _____

Date of Mailing _____

Date of Mailing _____