

CIRCUIT COURT OF ILLINOIS

Sixth Judicial Circuit
Champaign County

Petitioner (person completing the form)
Name(s) of other protected parties

- Independent
Criminal
Juvenile

Check if filing on behalf of:
a minor child, or an adult who because of age, disability, health, or inaccessibility cannot file the petition (list name(s) below)

(file stamp)

Case No: (to be completed by Court)

vs.
Respondent

LEADS #:

Respondent's date of birth:

ORDER FOR EXTENSION AND/OR MODIFICATION OF STALKING NO CONTACT ORDER

The Court finds that: an emergency order OR a plenary order was entered on

Notice given to Respondent by personal service by mailing pursuant to 740 ILCS 21/115 (e). The Court having jurisdiction of the subject matter and the parties, it is hereby ordered that:

- 1. An extension of the Order is granted and is hereby extended to 20\_\_ at \_\_ a.m./p.m.(not to exceed two years).
2. An extension of the Order is granted and is hereby to remain in effect until vacated or modified. (Only if entered in conjunction with a criminal prosecution and judgment of conviction for stalking is entered. (740 ILCS 21/105 (b)(3))
3. A hearing on the Order is set for \_\_, 20\_\_ at \_\_ a.m./p.m., at the Champaign County Courthouse, Courtroom \_\_, 101 East Main Street, Urbana, Illinois.
4. The Order is vacated.
5. The Order is modified as follows:

Order to be served on Respondent.

JUDGE

Date:

Petitioner Respondent given a copy of this Order in open court on \_\_ / \_\_ / \_\_.
cc: Petitioner Respondent Counsel of Record Sheriff Advocate Jail S/A

**SERVICE**

I certify that I served this Order on Respondent as follows: (Please check appropriate box and complete information below.)

**Individual Respondent – Personal**

By leaving a copy of the Order with named Respondent, \_\_\_\_\_,  
personally on \_\_\_\_\_.

**Individual Respondent - Abode**

By leaving a copy of the Order at the usual place of abode of named Respondent with a person of his family, of the age of 13 years or upwards, informing that person of the contents and also sending a copy of the Summons in a sealed envelope with postage fully prepaid, addressed to named Respondent at his usual place of abode.

Name of Respondent \_\_\_\_\_

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

Name of Person Summons given to \_\_\_\_\_

Sex \_\_\_\_\_ Race \_\_\_\_\_ Approximate Age \_\_\_\_\_

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

Place of Service \_\_\_\_\_

Respondent not found in this County.

Service by mailing notice fully pre-paid on \_\_\_\_\_ at \_\_\_\_\_ a.m./p.m., at  
Date  
\_\_\_\_\_ and addressed to \_\_\_\_\_,  
Place of mailing Respondent's name Street  
\_\_\_\_\_, \_\_\_\_\_  
City, State Zip

(S.C. t. Rule 11 (b)(c) 12(b) Service is complete four days after mailing)

I certify that Respondent was served while incarcerated at \_\_\_\_\_.

Sheriff \_\_\_\_\_

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

Date \_\_\_\_\_