

IN THE CIRCUIT COURT  
FOR THE SIXTH JUDICIAL CIRCUIT  
CHAMPAIGN COUNTY, ILLINOIS

\_\_\_\_\_  
Plaintiff,  
vs. \_\_\_\_\_  
Defendant.

)  
)  
)  
)  
) No. \_\_\_\_-FC-\_\_\_\_  
)  
)  
)  
)

**ALIAS SUMMONS**  
Residential Foreclosure

To each defendant:

You are summoned and required to file an answer\* in this cause, or otherwise file your appearance\* within thirty (30) days after service of this summons, not counting the day of services. **IF YOU FAIL TO DO SO, A JUDGEMENT 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 <https://efile.illinoiscourts.gov/service-providers.htm> to learn and to select a service provider. If you need additional help or have trouble e-filing, visit <http://www.illinoiscourts.gov/FAQ/gethelp.asp>.

**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 Sixth Judicial Circuit, this case is set for Mandatory Mediation on \_\_\_\_\_ at \_\_\_\_\_ am / pm at the Self Help Desk on the first floor of the Champaign County Courthouse, located at 101 East Main St, Urbana, Illinois. You will meet with the Mediation Administrator to see if you qualify to continue in the mediation program, to discuss options you may have, and to pre-screen you for a potential mortgage modification. For further information on the mediation process please see the attached NOTICE OF MANDATORY MEDIATION.

**YOU MUST APPEAR ON THE DATE ABOVE 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 thirty (30) days after its date.

(Seal of Court)

WITNESS \_\_\_\_\_  
Date

Attorney or Party, if not represented by an attorney Name  
ARDC #  
Firm Name  
Attorney for  
Address  
City & Zip  
Telephone

\_\_\_\_\_  
(Clerk of the Circuit Court)

\*The Answer and/or Appearance filing fee is based upon the dollar amount of said case\*