STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT

JACKSON COUNTY

_____

Petitioner's Name

Name(s) of other protected parties

_____

_____

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)

_____

vs.

_____

Respondent's Name

☐ Independent
☐ Criminal
☐ Juvenile

(file stamp)

Case # - OP -

LEADS #_____

Respondent date of birth _____

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

The court finds that: ☐ an emergency order OR ☐ a plenary order was entered on _____.

Notice given to Respondent ☐ by personal service ☐ mailing pursuant to Supreme Ct. Rules 11 and 12.
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 ____ o'clock A .M. (not to exceed two years).

☐ 2. Two years following expiration of any sentence of supervision, conditional discharge, probation, periodic imprisonment, imprisonment or mandatory supervised release on _____.

☐ 3. A hearing on the order is set for _____, 20___ at _____ o'clock ___ .M., at JACKSON County Courthouse, Courtroom # _____, at 1001 Walnut Street, Murphysboro, Illinois.

☐ 4. The order is vacated.

☐ 5. The order is modified as follows:_____
_____

Order to be served on Respondent

_____
JUDGE

Date: _____

☐ Petitioner ☐ Respodent given a copy of this Order in open court on _____, 20_____

Cc: ☐ Petitioner ☐ Respondent ☐ Counsel of Record ☐ Sheriff ☐ Advocate ☐ Jail ☐ S/A

Form approved by the Conference of Chief Circuit Judges.
Effective December 11, 2009
Use required after January 1, 2010

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 motion 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: _____ , 20 ____ Time _____ o'clock ____ .M.

Name of Person Summons given to _____

Sex _____ Race _____ Appropriate Age _____

Date of Mailing: _____

Place of Service: _____

( ) Respondent not found in this County.

( ) Service by mailing notice, postage, fully pre-paid on _____, 20 ____, at _____ o'clock, ___ .M.,
date

_____ and addressed to _____ , _____ ,
Place of mailing *Respondent's name* *Street Address*

_____, _____, _____.

(S.Ct. Rule 11 (b)(3) and 12(b)(3). Service is complete four days after mailing)

( ) I certify that Respondent was served while incarcerated at _____

Sheriff_____

By Deputy_____

Date_____