

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS  
FIRST MUNICIPAL DISTRICT TRAFFIC

PEOPLE OF THE STATE OF ILLINOIS

vs.

Ticket No. \_\_\_\_\_

\_\_\_\_\_  
Defendant/Petitioner

NOTICE OF FILING

TO: State's Attorney/County of Cook  
69 West Washington Street, 31<sup>st</sup> Floor, Chicago, Illinois 60602

You are hereby notified that \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address) (City/State/Zip) (Telephone)

Attorney(s) for \_\_\_\_\_  
(Name) (Address)

\_\_\_\_\_ did on \_\_\_\_\_, \_\_\_\_\_, file with the Clerk of the Circuit Court, in Room 401, 50 West Washington Street, Chicago, Illinois, a PETITION TO RESCIND STATUTORY SUMMARY SUSPENSION, a copy of which is attached.

\_\_\_\_\_  
Signature

PROOF OF SERVICE BY DELIVERY

I, \_\_\_\_\_ the attorney/non attorney certify that on \_\_\_\_\_, \_\_\_\_\_, I served this notice by delivering a copy personally to the State's Attorney's Office, 69 West Washington Street, 31<sup>st</sup> Floor, Chicago, Illinois 60602.

Under penalties as provided by law, I certify that the statements set forth herein are true and correct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

PROOF OF SERVICE BY MAIL

I, \_\_\_\_\_ the attorney/non attorney certify that I served this notice by mailing a copy to the State's Attorney's Office, 69 West Washington Street, 31<sup>st</sup> Floor, Chicago, Illinois 60602 at \_\_\_\_\_ a.m./p.m. on \_\_\_\_\_, \_\_\_\_\_, with proper postage prepaid.