



NOTICE OF COMPLETION OF LIMITED SCOPE APPEARANCE

IN THE STATE OF ILLINOIS, CIRCUIT COURT

This is the lawyer's notice that they have completed their services.

COUNTY: _____
County Where You Are Filing the Case

Enter the case information as it appears on your other court documents.

PLAINTIFF/PETITIONER OR IN RE: _____
Who started the case. First, Middle, and Last Name, or Business Name

DEFENDANTS/RESPONDENTS: _____
Who the case was filed against.

First, Middle, and Last Name, or Business Name

Case Number _____



I **withdraw my Limited Scope Appearance** for the Client listed below pursuant to Supreme Court [Rule 13\(c\)\(7\)](#). I have completed all services within the scope of the *Notice of Limited Scope Appearance*, and I have completed all acts ordered by the court within the scope of that appearance. My withdrawal is automatic upon filing this *Notice*.

Service of court papers on me under Supreme Court [Rule 11](#) is no longer required. Service of documents continues to be required for Client below to their address in the court record.

NOTICE TO CLIENT: _____
Client Name

You have the **right to object** to your lawyer's withdrawal if you believe that your lawyer has not finished everything that they agreed to do.

To object:

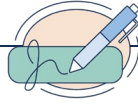
Withdrawal in Open Court: If your lawyer has withdrawn in open court, you can tell the judge that you object. You must do it in court right then. The court will hold a hearing either immediately or on another date.

- OR -

Withdrawal Outside of Court: If you received this *Notice* and your lawyer is not withdrawing during court, you can file an objection.

1. Fill out and sign the attached *Objection to Completion of Limited Scope Appearance* form, including the Proof of Filing and Delivery.
2. File the *Objection* within **21 days** after service of this *Notice of Completion of Limited Scope Appearance*.
3. After you file the *Objection* with the court, send a copy of it to your lawyer and the other people listed in the Proof of Filing and Delivery attached to the *Objection*. Check the boxes to show how you sent the *Objection* to each person.

If you file and send an *Objection* within the 21-day period, your lawyer will schedule a hearing date. Your lawyer will send you notice of the date. You must attend the hearing and explain to the judge why you believe that your lawyer has not finished everything that your lawyer agreed to do for you.



LAWYER SIGNATURE

Signature of Lawyer

Name of Lawyer

Lawyer's Address

Lawyer's Telephone Number

Lawyer's Email

Attorney #

Law Firm or Organization

Proof of Filing and Delivery

I certify that this *Notice* has been filed with the court on _____.
Month, Day, Year

I served this *Notice* on the following people, by the method checked for each.

Note to Withdrawing Lawyer

If you are withdrawing in open court, you must present this *Notice* to your client in court. The judge may also require you to serve this on parties who were neither present nor represented at the hearing.

If you are withdrawing outside of court, you must serve this *Notice* and an *Objection to Completion of Limited Scope Appearance on the Client* you represented, all lawyers of record and parties not represented by a lawyer (unless excused by court order), and the judge.

PROOF OF DELIVERY

Fill out the information below to show how you are sending this document to the other people in the case. If a person in the case has a lawyer, **you must send this document to their lawyer.**

A. I am sending this document to:

Name: _____
First Middle Last Name

Address: _____
Street, Apt. # City State Zip Code

Email Address: _____

By: Electronically to the email address in **A**

By email (*not through an EFSP*).

Using an approved electronic filing service provider (EFSP).

I or the person I am sending the document to do not have an email address. I am sending the document by:

Mail or third-party carrier to the address in **A**, with postage or delivery charge prepaid.

Location of mailbox or third-party carrier: _____
City State

Personal hand delivery at this address:

NOTE: You can only deliver to the party, party's family member over 13 at party's residence, party's lawyer, or party's lawyer's office

Address _____
Street, Apt. #, City, State, and Zip Code

Mail to the address in **A**, from a prison or jail: _____
Name of Prison or Jail

This document will be sent on: Date: _____ Time: _____
Month, Day, Year Include AM or PM

B. I am not sending these documents to additional people.

- OR -

I am sending these documents to an additional person not listed in **A**:

Name: _____
First Middle Last Name

Address: _____
Street, Apt. # City State Zip Code

Email Address: _____

By: Electronically to the email address in **B**:

- By email (*not through an EFSP*).
- Using an approved electronic filing service provider (EFSP).

I or the person I am sending the document to do not have an email address. I am sending the document by:

Mail or third-party carrier to the address in **B**, with postage or delivery charge prepaid.

Location of mailbox or third-party carrier: _____
City State

Personal hand delivery at this address:

NOTE: You can only deliver to the party, party's family member over 13 at party's residence, party's lawyer, or party's lawyer's office

Address _____
Street, Apt. #, City, State, and Zip Code

Mail to the address in **B**, from a prison or jail: _____
Name of Prison or Jail

This document will be sent on: Date: _____ Time: _____
Month, Day, Year Include AM or PM

I am sending the document to more than 2 people and have completed an *Additional Proof of Delivery* form.



SIGN

Under [735 ILCS 5/1-109](#), your signature means that you:

1) certify that everything in this document is true and correct, and 2) understand that making a false statement on this form is perjury and has penalties provided by law.

If you are filling out this form online, sign your name by typing it. If you are filling out this form by hand, sign and print your name.

Your Signature */s/* _____ Print Your Name _____

Your Address _____
Street, Apt. # City State Zip Code

Your Phone Number _____ Attorney Number (if any) _____

Your Email (if you have one) _____

Be sure to **check your email every day** so you do not miss important information, court dates, or documents from other parties.