

<b>STATE OF ILLINOIS, CIRCUIT COURT</b>  _____ <b>COUNTY</b>		<b>IDENTITY THEFT AFFIDAVIT (Credit Card or Debt Buyer Collection Action)</b>		<i>For Court Use Only</i>	
<b>Instructions ▼</b> Directly above, enter the name of the county where the case was filed. Enter the name of the person who started the lawsuit as Plaintiff. Enter the name of the person being sued as Defendant. Enter the Case Number given by the Circuit Clerk.		_____ <b>Plaintiff</b> <i>(First, middle, last name)</i>  V.  _____ <b>Defendant</b> <i>(First, middle, last name)</i>		_____ <b>Case Number</b>	

Complete this form and file it with the Circuit Clerk.

You must also complete the Illinois Attorney General Identity Theft Affidavit and send it to the other party.  
 You can find it here:  
[www.ag.state.il.us/publications/pdf/victim.pdf](http://www.ag.state.il.us/publications/pdf/victim.pdf)

1. I am the defendant in this lawsuit.
2. This lawsuit is about a debt that I did not create. Someone stole my identity and used my identity to create the debt.
3. I have completed an Illinois Attorney General Identity Theft Affidavit. I am mailing the Illinois Attorney General Identity Theft Affidavit, along with all required documentation, to the plaintiff.

Under the Code of Civil Procedure, [735 ILCS 5/1-109](#), making a statement on this form that you know to be false is perjury, a Class 3 Felony.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

Enter your complete address and telephone number.

**I certify that everything above is true and correct. I understand that making a false statement On this form is perjury and has penalties provided by law under [735 ILCS 5/1-109](#).**

/s/ \_\_\_\_\_  
*Your Signature* *Street Address*

\_\_\_\_\_ \_\_\_\_\_  
*Print Your Name* *City, State, ZIP*

\_\_\_\_\_ \_\_\_\_\_  
*Telephone*

**PROOF OF DELIVERY**

In **1a**, enter the name, mailing address, and email address of the party or lawyer to whom you sent the document.

In **1b**, check the box to show how you sent the document, and fill in any other information required on the blank lines.

**CAUTION:** If the other party does not have a lawyer, you may send the document by email only if the other party has listed their email address on a court document.

In **c**, fill in the date and time that you sent the document.

In **2**, if you sent the document to more than 1 party or lawyer, fill in **a**, **b**, and **c**. Otherwise leave **2** blank.

## 1. I sent this document:

a. To:

Name:

*First**Middle**Last*

Address:

*Street, Apt #**City**State**ZIP*

Email \_\_\_\_\_

b. By:

☐

Personal hand delivery

☐

Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

\_\_\_\_\_  
*Address of Post Office or Mailbox*☐

Third-party commercial carrier, with delivery paid for at:

\_\_\_\_\_  
*Name (for example, FedEx or UPS ) and office address*☐

The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)

☐Email (*not through an EFM or EFSP*)☐

Mail from a prison or jail at:

\_\_\_\_\_  
*Name of prison or jail*

c. On:

\_\_\_\_\_  
*Date*

At:

\_\_\_\_\_  
*Time*☐

a.m.

☐

p.m.

## 2. I sent this document:

a. To:

Name:

*First**Middle**Last*

Address:

*Street, Apt #**City**State**ZIP*

Email \_\_\_\_\_

b. By:

☐

Personal hand delivery

☐

Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

\_\_\_\_\_  
*Address of Post Office or Mailbox*☐

Third-party commercial carrier, with delivery paid for at:

\_\_\_\_\_  
*Name (for example, FedEx or UPS ) and office address*☐

The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)

☐Email (*not through an EFM or EFSP*)☐

Mail from a prison or jail at:

\_\_\_\_\_  
*Name of prison or jail*

c. On: \_\_\_\_\_  
Date

At: \_\_\_\_\_ ☐ a.m. ☐ p.m.  
Time

In 3, if you sent the document to more than 2 parties or lawyers, fill in **a**, **b**, and **c**. Otherwise leave 3 blank.

3. I sent this document:

a. To:  
Name: \_\_\_\_\_  
First Middle Last  
Address: \_\_\_\_\_  
Street, Apt # City State ZIP  
Email address: \_\_\_\_\_

b. By: ☐ Personal hand delivery  
☐ Regular, First-Class Mail, put into the U.S. Mail with postage paid at:

\_\_\_\_\_  
Address of Post Office or Mailbox

☐ Third-party commercial carrier, with delivery paid for at:

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Name (for example, FedEx or UPS ) and office address

☐ The court's electronic filing manager (EFM) or an approved electronic filing service provider (EFSP)

☐ Email (not through an EFM or EFSP)

☐ Mail from a prison or jail at:

\_\_\_\_\_  
Name of prison or jail

c. On: \_\_\_\_\_  
Date

At: \_\_\_\_\_ ☐ a.m. ☐ p.m.  
Time

☐ I have attached an *Additional Proof of Delivery* form.

If you sent your document to more than 3 parties or lawyers, check the box and insert the *Additional Proof of Delivery* form after this page.

Under the Code of Civil Procedure, [735 ILCS 5/1-109](#), making a statement on this form that you know to be false is perjury, a Class 3 Felony.

After you finish this form, sign and print your name.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

**I certify that everything in the Proof of Service is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under [735 ILCS 5/1-109](#).**

/s/ \_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Print Your Name

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Telephone