

STATE OF ILLINOIS

UNITED STATES OF AMERICA

COUNTY OF DU PAGE

IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT

PETITIONER

VS

RESPONDENT

CASE NUMBER

**BODY ATTACHMENT
FOR
INDIRECT CIVIL CONTEMPT**

File Stamp Here

The Respondent, having failed to appear to show cause why he/she should not be held in Indirect Civil Contempt of Court, after having been given notice and thereafter being personally served, and thereby afforded an opportunity to do so pursuant to rule and statute provided; on the motion of _____

This court hereby issues this **Body Attachment for Indirect Civil Contempt** commanding the Sheriff of DuPage County and all Peace Officers in the State of Illinois to take custody of _____ and bring him/her before this court forthwith to answer for indirect civil contempt of this court for failure to comply with and obey orders of this court heretofore entered.

Said Body Attachment is returnable in Courtroom _____ DuPage County Judicial Center, 505 N. County Farm Road, Wheaton, Illinois on any of the following suggested dates and times: _____

If the arrested person fails to make bond, then he/she should be taken either before the Judge who issued this Body Attachment or before any other Judge within the 24 hours following arrest. If the arrested person is apprehended in a county other than DuPage and is admitted to bail; the body attachment, bail bond form, and the cash bail shall be forwarded without delay to the Clerk of the 18th Judicial Circuit Court, P.O. Box 707, Wheaton, Illinois 60187-0707.

BOND ON THIS BODY ATTACHMENT IS SET IN THE AMOUNT OF \$ _____

This writ expires one year after the date of issue.

NOTICE TO ATTORNEY PREPARING THIS ORDER

You must complete as much of the information below as possible otherwise the Sheriff will not attempt to make any service on this Body Attachment.

Address of Respondent _____ Age _____ Sex _____ Race _____
City _____ Telephone _____ Hair _____ Eyes _____ Height _____ Weight _____
Place of Employment _____
Address _____ Drivers License # _____
Remarks _____ Birth Date _____

Name: _____ ☐ Pro Se

DuPage Attorney Number: _____

Attorney for: _____

Address: _____

City/State/Zip: _____

Telephone Number: _____

Email: _____

Judge

Date: _____