

**CIRCUIT COURT OF ILLINOIS**

**Sixth Judicial Circuit  
Champaign County**

\_\_\_\_\_  
**Petitioner(s)**

**vs.**

**Case No:** \_\_\_\_\_

\_\_\_\_\_  
**Respondent(s)**

**PAYMENT ORDER**

YOU HAVE BEEN ORDERED AND DIRECTED TO MAKE:

installment payments in the sum of \$ \_\_\_\_\_ commencing on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, and a like amount ( ) weekly, ( ) biweekly or ( ) monthly thereafter until total judgment and cost in the sum of \$ \_\_\_\_\_ have been paid in full; said payments to be made to:

\_\_\_\_\_ at \_\_\_\_\_,  
Payee Street Address

\_\_\_\_\_, Illinois \_\_\_\_\_.  
City Zip

IT IS FURTHER ORDERED THAT:

1. The above Payment Order is binding on you until the full amount of the judgment has been paid, or until otherwise ordered by the Court.
2. The payments must be made in the time, amount and place specified above.
3. If, for any reason, you are unable to make a payment, you must appear before the Judge giving this Payment Order and request that the payments be temporarily stopped or reduced. Your request will then be considered at a hearing which will be held at that time or shortly thereafter.
4. At the time of the hearing, you will be placed under oath and state the reasons why you cannot make the payments as ordered. The Judge will then decide if the payments should be temporarily stopped or reduced.
5. You must notify Petitioner's Attorney or the Petitioner, in the event that he or she is not represented by an Attorney, within 48 hours of any change of address and/or employment status.
6. If you do not make the payments as ordered without good cause being shown, and further fail to obtain permission from the Judge to have the payments temporarily stopped or reduced, you may be held in contempt of court which could result in a jail sentence.

Date: \_\_\_\_\_, 20 \_\_\_\_ Entered: \_\_\_\_\_  
Judge

I, the undersigned, approve the above and forgoing Payment Order as to form and acknowledge receipt of a copy of such Order.

Telephone: \_\_\_\_\_

\_\_\_\_\_  
Respondent's Signature

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

\_\_\_\_\_  
City/State/Zip Code

\_\_\_\_\_  
Telephone