

**STATE OF ILLINOIS
DEPARTMENT OF FINANCIAL AND PROFESSIONAL REGULATION
DIVISION OF PROFESSIONAL REGULATION/DIVISION OF REAL ESTATE**

DEPARTMENT OF FINANCIAL AND)
PROFESSIONAL REGULATION)
OF THE STATE OF ILLINOIS,)
Complainant,)
OR) **No.** _____)
In Re: Petition for Restoration of)
_____))
License No. _____))
Petitioner/Respondent.)

APPEARANCE

Pursuant to 68 Ill. Admin. Code 1110.90, the undersigned, _____,
of the law firm, _____,
hereby enters an appearance as attorney for Petitioner/Respondent/Applicant(s)
_____ in this matter. I affirm that I am ____ licensed to practice law in Illinois or ____ appearing *pro hac vice*.

Signature of Attorney

Attorney Name: _____

Respondent/Petitioner/Applicant Name: _____

ARDC Number: _____

Address: _____

Firm Name: _____

Address: _____

Email: _____

Telephone: _____

Email: _____