

IN THE UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF ILLINOIS
Springfield Division

_____,)
)
Plaintiff(s),) Case No. _____
)
vs.)
)
_____,)
)
Defendant(s).)

NOTICE OF INTENT TO REQUEST REDACTION

Notice is hereby given that a statement of redaction will be submitted to the Court Reporter within 21 days from the filing of the transcript with the Clerk of Court. I understand the Statement of Requested Redactions shall be submitted directly to Kathy Sullivan, Official Court Reporter, 600 E. Monroe Street, Room 312, Springfield, IL 62701 or Kathy.Sullivan@ilcd.uscourts.gov.

s/ _____
Attorney for (Plaintiff or Defendant)
Address: _____

Date: _____

CERTIFICATE OF SERVICE

I hereby certify that on ___(Date)___, I electronically filed the foregoing with the Clerk of the Court using the CM/ECF system which will send notification of such filing to the following: _____, and I hereby certify that I have mailed by United States Postal Service the document to the following non CM/ECF participants: _____.

s/ _____