## SAMPLE FORMAL RESPONSE STATE OF ILLINOIS DEPARTMENT OF HUMAN RIGHTS

IN THE MATTER OF	F:	)
(name)		) )
Complainant,		) Charge No.:
and		) EEOC No.: )
(name)		) )
Respondent.		) )
NOW COME responds to the Chafollows:	S the Respondent, arge of Discrimination fil	, and ed against it by the Complainant,, as
number as are in the	e charge. The following	e and respond to as many points by letter and points are used as examples only; the charge ed and numbered points.)
I. A.	ISSUE/BASIS	
B.	Complainant is chargin numbered allegation, particular case:  1. Respondent admits  2. Respondent denies Charge  3. Respondent lacks so a more definite so	ATIONS (These are the specific allegations g against you.) You need to respond to each using whatever response applies in this thator Respondent denies that all the allegations in paragraphof the sufficient knowledge to answer and demands statement that that it discriminated against Complainant.
Respectfully (Respondent	*	
By:(name	e/title)	
	complainant as indicate	you gave or mailed a copy of your formal ed on the next page.

IN-5 packet (HB 3092) Rev. 09/18

## Instructions:

- 1. A person with knowledge of the facts **should sign the formal Response**. Unless Respondent's attorney has first-hand knowledge of the facts of the charge, Respondent's attorney should not sign. (Usually, Respondent's Human Resources Manager has sufficient knowledge to sign.)
- 2. If Respondent's attorney signs the formal Response, then Respondent's attorney must provide his/her name, law firm name, address, and telephone number on the response.
- 3. In order for the formal Response to be complete, you must:
  - a. Serve <u>a copy of the formal Response on the Complainant by mail or other means;</u> and
  - b. Indicate to the Department that you have served the formal Response in a Certificate of Service or other written statement.

## SAMPLE CERTIFICATE OF SERVICE

## CERTIFICATE OF SERVICE

The undersigned certifies that a copy of the foregoing formal Response to the charge of discrimination was served upon:

Complainant Name Address Address			
By depositing same in the U.S. Mail at <u>(address)</u> heday of, 20	, <u>(city)</u>	, IL	(zip code) or
Name			