STATE OF ILLINOIS HUMAN RIGHTS COMMISSION

HOWART ROLLS COMMISSION				
IN THE MATTER OF THE REQUEST FOR REVIEW BY: Petitioner.)))) Charge No.: EEOC / HUD No.: ALS No.:			
MOTION FOR VOLUNTARY DIS	SMISSAL – REQUEST FOR REVIEW			
MOTION FOR VOLUNTARY DIS	SWISSAL - REQUEST FOR REVIEW			
underlying charge filed with Illinois Department o	Request for Review in the above-captioned matter and the of Human Rights. rily without pressure from any organization or individual.			
2. This motion is being made knowingly and volunta	Thy without pressure from any organization of murvidual.			
3. The Petitioner sent a copy of this motion to the II Street, 7th Floor, Chicago, IL 60601.	llinois Department of Human Rights at 555 West Monroe			
/s/	Street Address:			
Your Signature				
Printed Name:	City/State/Zip:			
Law Firm Name:	Telephone:			
Attorney for Petitioner	Email Address:			

STATE OF ILLINOIS HUMAN RIGHTS COMMISSION

IN THE MATTER OF THE REQUEST FOR REVIEW BY:)))	Charge No.: EEOC / HUD No.:				
Petitioner.)))))	ALS No.:				
CERTIFICA						
1. I certify under penalty of perjury that I sent a cop	y of the fol	lowing documer	nt:			
2. To:						
Name	Name	Name				
Street Address	Street	Street Address				
City State Zip	City		State	Zip		
Email Address	Email	Address				
3. By (check one):						
/s/ Your Signature	Street	Street Address:				
Printed Name:		City/State/Zip:				
Law Firm Name:	_ Teleph	Telephone:				
Attorney for Petitioner	Email	Email Address:				