

# Documentation Required to Obtain a DUI Evaluation

## IL Driver's Abstract for Court Purposes

Go to any IL Secretary of State Driver's License Facility (find your nearest location by clicking here: <https://www.ilsos.gov/facilityfinder/facility>) **OR** request online (see instructions below)

- To request online, visit: <https://www.ilsos.gov/drivingrecord/>

\*You will need your driver's license information (see below)\*

The screenshot shows a web browser window with the URL [ilsos.gov/drivingrecord/](https://www.ilsos.gov/drivingrecord/). The browser's address bar and tabs are visible at the top. The page header includes the text "SECRETARY OF STATE" and a search bar for "Cyberdriveillinois.com". The main heading is "Driving Record Abstract". Below this is the section "Driver's License Information" with the instruction: "Enter the information **exactly** as it appears on your Driver's License." The form contains several input fields: "Driver's License Number required" (with "R999-9999-9999" entered), "Date of Birth required" (with "mm-dd-yyyy" entered), "Last 4 of SSN required" (empty), "Issue Date on License required" (with "mm-dd-yyyy" entered), "Expiration Date on License required" (with "mm-dd-yyyy" entered), "Class of License required" (empty), and "Weight required" (empty). A note below the SSN field states "SSN is not on DL". Below the input fields is an "Affirmation of Requestor" section with a checkbox and the text: "I hereby request a certified copy of my Illinois Driving Record Abstract. I affirm, under penalty of perjury, that I am requesting my own personal driving record and all the information submitted is true and correct. I understand that if I submit any false information, administrative, civil and/or criminal actions may be taken against me. Checking the box and typing my name will serve as my electronic signature. required". Below this are "First Name required" and "Last Name required" input fields. A note below these fields states: "First and Last Name must be entered **exactly** as it appears on your Driver's License." At the bottom left of the form is a "Submit" button.

- Select **Affected (“Court Purposes”) Driving Record Abstract – \$12** option (see below)

\*The cost is \$12 (as of 09/03/2020)\*



## Driving Record Abstract

### Choose Abstract

Please determine the type of record you would like to purchase. There are two types of driving record abstracts. All driving records are certified by the Secretary of State. Please note that your driving record or records may be multiple pages in length.

Name	[REDACTED]
Driver's License Number	[REDACTED]



**Affected (“Court Purposes”) Driving Record Abstract – \$12**



This abstract will include all actions on your driving record. This record contains confidential information, such as court supervision dispositions, that are not included on a public driving record abstract. This record is only available to the affected driver (and his/her attorney), prosecutors, law enforcement and the courts. Therefore, you are advised that if you share this driving record abstract with anyone other than a prosecutor, law enforcement or a court, you may be providing confidential information that the person could not otherwise obtain from the Secretary of State.

**Public Driving Record Abstract – \$12**

A public record will contain your driving history and will include any suspensions, revocations or convictions for traffic violations that may appear on your record. It is the same record that an insurance company or employer could purchase from our office.

**Both Records – \$24**

Submit

**Law Enforcement Sworn Report**

This report is usually provided by the arresting officer at the same time a ticket is issued (see example below).

\*If you do not have your Sworn Report, the Notice of Summary Suspension of the same format (not the one later mailed to you by the Illinois Secretary of State) will be accepted.\*

**LAW ENFORCEMENT SWORN REPORT**  
- FTPO -

Circuit Court, GALLATIN County, DAV Municipal District

Case Number 19-06-375

Name MR. K

Operator:  Commercial Motor Vehicle  Placarded Haz. Mat. Vehicle

Street Address RD 604 City and/or County of Arrest GALLATIN

City & State ROCKFORD IL Arrest Date 06/10/06 1:07 AM

Sex M Date of Birth 02-18-78 Place of Refusal or Location of Test(s) SAYRE CO. ILL

Notice of Summary Suspension Given On 06/10/06 Ref. or Test Date 06/10/06 2:29 AM

THE SUSPENSION SHALL TAKE EFFECT ON THE 60th DAY FOLLOWING ISSUANCE OF THIS NOTICE OF SUMMARY SUSPENSION. SUBSEQUENT TO AN ARREST FOR VIOLATING SECTION 11-501 OF THE ILLINOIS VEHICLE CODE OR A SIMILAR PROVISION OF A LOCAL ORDINANCE, YOU ARE HEREBY NOTIFIED that on the date shown above, you were asked to submit to a chemical test(s) to determine the alcohol, other drug or drugs, intoxicating compound or compounds or any combination thereof content of your blood and warned of the consequences pursuant to Section 11-501 of the Illinois Vehicle Code. You have a right to a hearing to contest your suspension. You must file a petition to rescind your suspension within 90 days of this notice.

Because you refused to submit to or failed to complete testing, your driver's license and/or privileges will be suspended for a minimum of 6 months.\*

Because you submitted to testing conducted pursuant to Section 11-501.2 which disclosed:

an alcohol concentration of .190, which is 0.08 or more. [ANSWER 2-7]

any amount of a drug, substance or intoxicating compound in your blood or urine resulting from the unlawful use or consumption of Cannabis listed in the Cannabis Control Act, a controlled substance listed in the Illinois Controlled Substances Act or an intoxicating compound listed in the Use of Intoxicating Compounds Act;

your driving privileges will be suspended for a minimum of 3 months.\*

\*NOTE: If it is determined that you are not a "first offender", as defined in Section 11-503 of the Illinois Vehicle Code and:  
You refused to submit to, or failed to complete, all requested chemical testing, the period of suspension will be a minimum of 2 years; or if  
You submitted to chemical testing which resulted in an alcohol concentration of 0.08 or more or any amount of a drug, substance or intoxicating compound listed in the Cannabis Control Act, a controlled substance listed in the Illinois Controlled Substances Act or an intoxicating compound listed in the Use of Intoxicating Compounds Act, the period of suspension will be a minimum of 1 year.

Driver's license surrendered?  Yes  No (Reason: \_\_\_\_\_)

Driver's license valid in state of issue?  Yes (Sign receipt)  No (Void receipt)

I have complied with Section 11-501.1 by having reasonable grounds to believe the arrest was in violation of Section 11-501 or a similar provision of a local ordinance.  
(Explain) REASON FOR STOP WAS TO PROPERLY INSURE. DETECTED THE ODOR OF AN ALCOHOLIC BEVERAGE ON THE OTHER PERSON AND OBSERVED OPEN ALCOHOLIC BEVERAGE CONTAINERS IN THE VEHICLE. DRIVER ADMITTED NOTIKENK ANSWER AND FAILED FIELD SOBRIETY TEST. PBT .175

Pursuant to Section 11-501.1 of The Illinois Vehicle Code I have:  
 Served immediate notice of summary suspension of driving privileges on the above named person.  
 Given notice of summary suspension of driving privileges to the above named person by depositing in the United States mail said notice in an envelope with the postage prepaid addressed to said person at the address as shown on the Uniform Traffic Ticket.

Under penalties as provided by law pursuant to Section 7-109 of the Illinois Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct.

Signature of Arresting Officer J.P. OGD Identifying Number 4849

Date 06/10/06