



COOK COUNTY ASSESSOR'S OFFICE

118 NORTH CLARK STREET, CHICAGO, IL 60602

PHONE: 312.443.7550 WEBSITE: WWW.COOKCOUNTYASSESSOR.COM

Withdrawal and/or  
Substitution of  
Representation From

Date: \_\_\_\_\_

Complaint No: \_\_\_\_\_

Township: \_\_\_\_\_

P.I.N. #: \_\_\_\_\_

**FOR USE BY INDIVIDUALS**

I, \_\_\_\_\_, having filed the  
Above referenced complaint as an individual hereby  
withdraw my individual appearance.

\_\_\_\_\_  
Signature

I/We, \_\_\_\_\_, hereby enter our  
appearance as attorney(s)/agent(s) for complainant in the  
above referenced complaint.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Attorney Code

I, \_\_\_\_\_, the complainant in  
the above referenced complaint hereby authorize  
the above withdrawal and substitution in connection  
with the above complaint.

\_\_\_\_\_  
Signature

**FOR USE BY ATTORNEY(S)/AGENT(S)**

I/We, \_\_\_\_\_, hereby withdraw  
our appearance as attorney(s)/agent(s) for the complainant  
in the above-referenced complaint

\_\_\_\_\_  
Signature

I/We, \_\_\_\_\_, hereby enter our  
appearance as attorney(s)/agent(s) for complainant in the  
above referenced complaint.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Attorney Code

I, \_\_\_\_\_, the complainant in  
the above referenced complaint hereby authorize  
the above withdrawal and substitution in connection  
with the above complaint.

\_\_\_\_\_  
Signature