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| --- | --- | --- | --- |
| **State of Minnesota** |  | **District Court** | |
| County |  | Judicial District: |  |
|  |  | Court File Number: |  |
|  |  | Case Type: |  |

Plaintiff

**Affidavit in Support of Motion**

vs

Defendant

My name is . My written statement of facts:

*Use another sheet of paper if you need more room.*

**I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.**

Dated:

County and State where signed

Signature

Name:

Address:

City/State/Zip:

Telephone:

E-mail address: