

County of: _____	Court File Number: _____
Judicial District: _____	Case Type: <u>Conciliation</u>

Plaintiff

VS

Defendant

Check box if there is more than one plaintiff or more than one defendant. List the other parties on the *Additional Litigants Form, CCT702*.

Affidavit in Support of Motion to Vacate Conciliation Court Judgment after Deadline (CCT507)

Minn. R. Gen. Prac. 520(b)

I declare the following is true:

1. My name is _____.
2. The judgment in this case was entered on _____ (date).
3. I did not receive the *Summons* before the trial within enough time to allow a defense and did not receive notice of the order for default judgment within enough time to request a new hearing within 21 days (24 days if mailed) after Court Administration sent the *Notice of Conciliation Court Order*.
 - a. I received the *Summons* on _____ (date) OR I did not receive the *Summons*.
 - b. I learned of the order for default judgment on _____ (date).
4. I believe I have good cause for the court to vacate the judgment against me because:

5. I understand that the court may order me to pay additional costs (conditional or absolute) of up to \$50 if the motion is granted, which must be paid before a new hearing is set.

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

Date: _____

Signature: _____

Printed Name: _____

County and state where signed:

Address: _____

City/State/Zip: _____

Email: _____

Phone: _____