

State of Minnesota

District Court

County of: _____	Judicial District: _____
	Court File Number: _____
	Case Type: _____

Plaintiff / Petitioner (first, middle, last)

and

Defendant / Respondent (first, middle, last)

Date Case Filed: _____

**Complex Case Program
Election Form**

(Minn. Gen. R. Prac. 146)

Each party who has signed this document has read and understands the Complex Case Program (CCP) Rule 146 and agrees that this case may be governed by the CCP.

Name of Party:

Name of Party:

Attorney Name (Not Firm Name)

Attorney Name (Not Firm Name)

Address:

Address:

City/State/Zip:

City/State/Zip:

Telephone:

Telephone:

E-mail address:

E-mail address:

Minnesota Attorney License No.

Minnesota Attorney License No.

(Attach additional sheets for additional attorneys / parties)