State of Minnesota	District Court
County	Judicial District:
	Court File Number:
	Case Type:
	<u>-</u>
Plaintiff	
VS	Civil Complaint
Defendant	-
The Plaintiff makes the following complain	ts against the Defendant:
If you have more than 1 complaint against I any supporting facts.	Defendant, list each complaint separately, including
any supporting facts.	
1	
2	
2	
3.	
3	
4.	
5. For any other relief the court feels is	s fair and equitable.
Based on the complaints above, Plaintiff de	mands the following relief:
1	
2.	
2	
3.	
3	

4.	
	Add another page if more space is needed. Do not use the back of the paper.
	ACKNOWLEDGMENT
belief,	esenting this form to the court, I certify that to the best of my knowledge, information, and the following statements are true. I understand that if a statement is not true, the court can a penalty against me (such as to pay money to the other party, pay court costs, and/or other les).
1.	The information I included in this form is based on facts and supported by existing law.
2.	I am not presenting this form for any improper purpose. I am not using this form to: a. Harass anyone; b. Cause unnecessary delay in the case; or c. Needlessly increase the cost of litigation.
3.	No judicial officer has said I am a frivolous litigant.
4.	There is no court order saying I cannot serve or file this form.
5.	This form does not contain any "restricted identifiers" or confidential information as defined in Rule 11 of the General Rules of Practice (https://www.revisor.mn.gov/court_rules/gp/id/11/) or the Rules of Public Access to Records of the Judicial Branch (https://www.revisor.mn.gov/court_rules/rule/ra-toh/).
6.	If I need to file "restricted identifiers," confidential information, or a confidential document, I will use Form 11.1 and/or Form 11.2, as required by Rule 11.
Date	Signature
	Name:

11/20

E-mail:

Address:

City, State, Zip: ______
Telephone: _____