State of Minnesota	District Court
County	Judicial District:
	Court File Number:
	Case Type: Criminal - Postconviction
Petitioner	Petition for
vs	Postconviction Relief
State of Minnesota	Minn. Stat. § 590.01
	•
1. Information about the Case	
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I am the Petitioner named above, and I ask the other disposition in this case. Information above	ne Court for relief from the conviction, sentence, or yout this case:
District court file number:	
Charges:	
Date of conviction, sentence, or other di	sposition:
2. Previous Appeals or Postconviction Re	equests in this Case, if any
☐ I have filed an appeal in this case with the	e Court of Appeals.
Appellate court file number:	
Legal reasons (grounds) that supporte	ed my request:
☐ I have previously asked for postconviction	n relief from the District Court in this case:
Dates (if known):	
	ed my request:
	-
3. Grounds for Postconviction Relief	
I ask the Court for relief in this case because:	
(a) The conviction, sentence, or other disp	position violated my rights under the Constitution or
laws of the United States, or of the Stat	e of Minnesota, for the following reasons:

(b) I filed a motion under Minn. State was not available at trial) that estate	at. § 590.01, subd. 1a, and found scientific evidence (that ablishes my actual innocence.
4. Legal Memorandum	
_	explaining the legal reasons (grounds) that support this
OR	
☐ I am NOT filing a Memorandum of	Law.
5. Hearing	
☐ I ask the Court for a hearing. I undo though I have asked for one.	erstand that the Court may not schedule a hearing even
OR	
☐ I do not want a hearing.	
Everything I have stated in this petition	n is true and correct to the best of my knowledge.
Dated	Signature
	Self-Represented Attorney for Petitioner
	Name: Address:
	Address: City/State/Zip:
	Telephone:
	Email:
	Attorney Reg.: