

**State of Minnesota**

County \_\_\_\_\_

**District Court**

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Criminal - Postconviction

\_\_\_\_\_  
Petitioner

vs

\_\_\_\_\_  
State of Minnesota

**Proof of Service**

**(Postconviction Relief)**

My name is \_\_\_\_\_ I am at least 18 years old.

On \_\_\_\_\_ (date), at \_\_\_\_\_ (city and state where mailed), I served a copy of the following:

- Petition for Postconviction Relief*
- Memorandum of Law*
- Other: \_\_\_\_\_

upon each entity checked below by mailing a copy in a sealed envelope, postage prepaid, with the U.S. Postal Service.

<input checked="" type="checkbox"/> <b>Office of the MN Attorney General</b> 445 Minnesota Street St. Paul, MN 55101	<input checked="" type="checkbox"/> _____ County <b>Attorney's Office</b> _____ _____ _____	<input type="checkbox"/> _____ City <b>Attorney's Office</b> _____ _____ _____
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I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature

\_\_\_\_\_  
County and state where signed

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_