## INSTRUCTIONS NOTICE OF INTENT TO PROCEED TO JUDGMENT WITHOUT A HEARING

- **1.** Fill out and sign the *Notice of Intent to Proceed to Judgment Without a Hearing.*
- 2. Make <u>three</u> copies of this *Notice*.
- **3.** File the original *Notice of Intent to Proceed to Judgment Without a Hearing.*
- **4.** Serve your spouse with <u>a copy</u> of the *Notice of Intent to Proceed to Judgment Without a Hearing* at his or her last known address by first class U.S. mail.
  - Papers cannot be served on a legal holiday.
  - The form you prepared can be served by any of the following:
    - o The sheriff;
    - o Another adult; or
    - o You.
- **5.** The person who mailed the *Notice* must complete the *Affidavit of Service by Mail* and attach one copy of the *Notice of Intent to Proceed to Judgment Without a Hearing* to the *Affidavit of Service by Mail*.
- **6.** File the completed *Affidavit of Service by Mail* and its attachment with the Court.
- **7.** Keep one copy of the *Notice* for your records.

10<sup>th</sup> Judicial District Rev. 11/2018

District Court
Judicial District:
Court File Number:
Case Type: Dissolution
Notice of Intent to
Proceed to Judgment
Without a Hearing
will be made for a final judgment and decree to be
ate of this notice. You are further notified that the
nested in the Petition without a hearing. You should
ourt Administrator immediately if you have any
and decree. This notice is given pursuant to The
Rule 306.01(b).
Signature of Petitioner
Name
Name:
City/State/Zip:
E-mail address:

State of Minnesota	District Court
County	Judicial District:
	Court File Number:
	Case Type:
Petitioner / Plaintiff (first, middle, last	st)
and / vs	Affidavit of Service by Mail
Respondent /Defendant (first, middle	v, last)
T.	, state that I am at least 18 years of
(Name of person who mailed	, state that I am at least 18 years of
age having been born on	, and that on
I served the following papers	
	(list all papers mailed to the other party)
upon	by placing in an envelope a true and correct fother party)
at	in the City of, State
of, Zip Code	and depositing the envelope, with sufficient
postage, in the United States Mail at	the Post Office located in the City of
in the State of	
	T
I declare under penalty of perjury to correct. Minn. Stat. § 358.116.	that everything I have stated in this document is true and
D 1	
Dated:	Signature
	Name:
County and State where signed	Address:
	City/State/Zip:
	Telephone: ()
	E-mail address:

SOP104 State ENG Rev 7/15 www.mncourts.gov/forms Page 1 of 1