

FORM 116B. WRIT OF CERTIORARI

STATE OF MINNESOTA
IN SUPREME COURT

CASE TITLE:

WRIT OF CERTIORARI

Employee-
Relator,

SUPREME COURT NUMBER:

WORKERS' COMPENSATION COURT
OF APPEALS NUMBER:

vs.

DATE OF SERVICE OF WRITTEN
NOTICE OF DECISION:

Employer- Respondent,
Insurer-Respondent.

TO: The Workers' Compensation Court of Appeals:

You are hereby ordered to return to the Supreme Court within 30 days from this date the record, exhibits and proceedings in the above-entitled matter so that this court may review the decision of the Workers' Compensation Court of Appeals.

Copies of this writ and accompanying petition shall be served forthwith either personally or by mail upon the Secretary of the Workers' Compensation Court of Appeals and upon the Employer-Respondent(s) above-named or their attorney(s) at:

(address)

Proof of service shall be filed with the clerk of the appellate courts.

DATED:

Clerk of Appellate Courts

(Clerk's File Stamp)

By: _____
Assistant Clerk