FORM 104 CERTIFICATE OF REPRESENTATION AND PARTIES

STATE OF MINNESOTA COUNTY OF	DISTRICT COURT JUDICIAL DISTRICT		
	CASE NO.		
CERTIFICATE OF REP	RESENTATION AND PARTIES		
	ING LAWYER/PARTY NEEDS TO E THIS FORM)**		
Date Case Filed:	_		
	VS		
of filing, notify the court administrator in number of all counsel and unrepresented these rules). If that information is not the to the court administrator in writing by the Any party impleading additional parties administrator. The court administrator is	tes: "A party filing a civil case shall, at the time in writing of the name, address, and telephone d parties, if known (see form 104 appended to en known to the filing party, it shall be provided the filing party within seven days of learning it shall provide the same information to the cour shall, upon receipt of the completed certificate sented by counsel, of the date of filing the action		
LIST ALL LAWYERS/PRO SE PARTIE	S INVOLVED IN THIS CASE.		
LAWYER FOR PLAINTIFF(S)	<u>LAWYER FOR DEFENDANT(S)</u> (if not known, name party and address)		
Name of Party	Name of Party		
Atty Name (Not firm name)	Atty Name (Not firm name)		
Address	Address		

Phone Number	Phone Number			
MN Atty ID No.	MN Atty ID No.			
(Please use other side for additional lav	wyers/parties).			
Date	Filing Lawyer/Party			
Lawyer for:	Lawyer for:			
Name of Party	Name of Party			
Atty Name (Not firm name)	Atty Name (Not firm name)			
Address	Address			
Phone Number	Phone Number			
MN Atty ID No.	MN Atty ID No.			
Lawyer for:	Lawyer for:			
Name of Party	Name of Party			
Atty Name (Not firm name)	Atty Name (Not firm name)			
Address	Address			
Phone Number	Phone Number			

MN Atty ID No.	MN Atty ID No.	