

State of Minnesota

Conciliation Court

| | |
|------------------|--------------------------|
| County of: _____ | Judicial District: _____ |
| | Court File Number: _____ |
| | Case Type: Conciliation |

Plaintiff # 1

Name: _____
Address: _____

City/State/Zip: _____

vs

Plaintiff # 2

Name: _____
Address: _____

City/State/Zip: _____

Defendant # 1

Name: _____
Address: _____

City/State/Zip: _____

Defendant # 2

Name: _____
Address: _____

City/State/Zip: _____

**Conciliation Court
Additional Litigants Form**

Plaintiff # 3

Name: _____
Address: _____

City/State/Zip: _____
Date of birth: _____

Plaintiff # 4

Name: _____
Address: _____

City/State/Zip: _____
Date of birth: _____

Defendant # 3

Defendant # 4

Name: _____
Address: _____

City/State/Zip: _____
Date of birth: _____
Military Service: Yes No Unknown

Name: _____
Address: _____

City/State/Zip: _____
Date of birth: _____
Military Service: Yes No Unknown