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| --- | --- | --- | --- |
| State of Minnesota |  |  | District Court |
| County of: |  | Judicial District: |  |
|  |  | Court File Number: |  |
|  |  | Case Type: | Domestic Abuse |

|  |  |  |  |
| --- | --- | --- | --- |
| In the Matter of: |  | Request for HearingMinn. Stat. § 518B.01, subds. 5, 7 |  |
|  |  |  |
|  |  |  |
| Petitioner (first, middle, last) |  |  |
|  |  |  |
| [ ]  On behalf of:Other persons needing protection (first, middle, last) |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| [ ]  and for self |  |  |
| vs. |  |  |
|  |  |  |
|  |  |  |
| Respondent (first, middle, last) |  |  |

I am the Respondent in this action. My current address is:

My telephone number is

I respectfully ask the court to hold a hearing in this case.

Dated:

 Respondent

### NOTE

A hearing will not be held unless you request one within **five calendar days** of receiving these materials.