| STATE OF MINNESOTA<br>COUNTY OF | JUDICIAL DISTRICT  |
|---------------------------------|--|
| COUNTION                        | CASE TYPE: DIVISION:   |
| Plaintiff,                      | , NOTICE OF REQUEST FOR JUDGE REVIEW                                     |
| v.                              | Pov. Law Form No. JR-1 (September 2017)                                  |
|                                 | Case No.   |
| Defendant.                      |  |
| то:                             | , the opposing party:  |
| PLEASE TAKE NOT                 | ΓICE that the undersigned requests a review of the recommended Orde      |
| and Findings of the Housing     | Court Referee in this case by a District Court Judge at a time and place |
| set aside for the hearing of su |  |
|                                 | For review is made upon the following grounds:                           |
| 1. This request i               | of review is made upon the following grounds.                            |
|                                 |  |
|                                 |  |
| 2. The specific p               | provision(s) of the recommended findings or orders disputed is/are:_     |
|                                 |  |
|                                 |  |
|                                 |  |
|                                 |  |
| 3. A stay of exec               | cution of judgment:  |
| a. 🗆                            | is requested. The undersigned proposes payment into court in lieu o      |
| oond in the amount of her mo    | onthly rent for of \$, on or before 4:00 p.m. or                         |
|                                 |  |

|  |   |   | , and \$ by the day of each month while judge review is                     |  |
|--|---|---|---|--|
| pending.   |   |   |   |  |
|  | b.  |   | is not requested.   |  |
| 4.   | Trans   | Transcript of proceedings.  |   |  |
|  | a.  |   | The undersigned requests a transcript of proceedings.                       |  |
|  |   | i.  | ☐ The estimated transcript fee must be paid in cash or certified            |  |
| funds to the court reporter in advance with any balance due paid to release of the transcript. |   |   |   |  |
|  |   | ii.   | $\Box$ The undersigned requests that the transcript fee by waived <i>in</i> |  |
| forma pauperis.  |   |   |   |  |
|  | b.  |   | There was no hearing, so there is no transcript to request.                 |  |
| 5.   | Hear  | Hearing.  |   |  |
|  | a.  |   | The undersigned requests a hearing be scheduled before the reviewing        |  |
| judge.   |   |   |   |  |
|  | b.  |   | The undersigned does not request a hearing.                                 |  |
| 6.   | Under Minn. R. Civ. P. 11, I certify that, to the best of my knowledge: |   |   |  |
|  | a.  | this document is not being presented for any improper purpose, such as to harass or to cause unnecessary delay or needless increase in the cost of  |   |  |
|  | b.  | litigation;<br>the claims, defenses, and other legal contentions therein are warranted by<br>existing law or by a nonfrivolous argument for the extension, modification,<br>or reversal of existing law or the establishment of new law;<br>the allegations and other factual contentions have evidentiary support or, if<br>specifically so identified, are likely to have evidentiary support after a |   |  |
|  | c.  |   |   |  |
|  | d.  | reasonable opportunity for further investigation or discovery; the denials of factual contentions are warranted on the evidence or, if specifically so identified, are reasonably based on a lack of information or belief; and this document does not include any restricted identifiers and that all restricted identifiers have been submitted in a confidential manner as required by Minn.         |   |  |
|  | e.  |   |   |  |

I know that I may be fined or sanctioned by the court if this certification is false.

R. Gen. Prac. 11.

|           | Date                   | Signature         |
|-----------|------------------------|-------------------|
|           | County and State Where | Name:             |
|           | Document Is Signed     | Address:          |
| County: _ |                        | City, State, Zip: |
| State:    |                        |                   |
|           |                        | Telephone:        |

Under Minn. Stat. § 358.116, I declare under penalty of perjury that everything I have

7.

stated in this document is true and correct.