**Select the appropriate VERIFICATION, then cut-and-paste it into your Petition.**

[By Individual]

**STATE OF MINNESOTA )**

 **) ss**

**COUNTY OF RAMSEY )**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ having been first duly sworn on oath, deposes and states that s/he is (one of) the Petitioner(s) in the above entitled proceeding, that s/he has read the foregoing Petition and the same is true of his/her own knowledge, except as to matters therein stated on information and belief and as to such matters s/he believes it to be true.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed and sworn to (or affirmed) before me

on (date) by (name(s) of person(s) making statement).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

[By Attorney for Individual]

**STATE OF MINNESOTA )**

 **) ss**

**COUNTY OF RAMSEY )**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ having been first duly sworn on oath, deposes and states that s/he is the attorney for the Petitioner in the above entitled proceeding, that the Petitioner is not within the County where the attorney resides, that s/he has read the foregoing Petition and the same is true of his/her own knowledge, except as to matters therein stated on information and belief and as to such matters s/he believes it to be true.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed and sworn to (or affirmed) before me

on (date) by (name(s) of person(s) making statement).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

[By Officer of a Legal Entity]

**STATE OF MINNESOTA )**

 **) ss**

**COUNTY OF RAMSEY )**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ having been first duly sworn on oath, deposes and states that s/he is the (President / other officer) of (name of entity), a (Minnesota / other) (corporation / other legal entity),the Petitioner in the above entitled proceeding, that s/he has read the foregoing Petition and the same is true of his/her own knowledge, except as to matters therein stated on information and belief and as to such matters s/he believes it to be true.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed and sworn to (or affirmed) before me

on (date) by (name(s) of person(s) making statement).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

[By Partner]

**STATE OF MINNESOTA )**

 **) ss**

**COUNTY OF RAMSEY )**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ having been first duly sworn on oath, deposes and states that s/he is the a partner of (name of partnership), a (Minnesota / other) partnership, the Petitioner in the above entitled proceeding, that s/he has read the foregoing Petition and the same is true of his/her own knowledge, except as to matters therein stated on information and belief and as to such matters s/he believes it to be true.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed and sworn to (or affirmed) before me

on (date) by (name(s) of person(s) making statement).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

[By Attorney for Legal Entity]

**STATE OF MINNESOTA )**

 **) ss**

**COUNTY OF RAMSEY )**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ having been first duly sworn on oath, deposes and states that s/he is the attorney for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a (Minnesota / other) (type of legal entity), that none of its (officers / managers / partners) acquainted with the facts and capable of making an affidavit to verify the Petition are within the County where the attorney resides, that s/he has read the foregoing Petition and the same is true of his/her own knowledge, except as to matters therein stated on information and belief and as to such matters s/he believes it to be true.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed and sworn to (or affirmed) before me

on (date) by (name(s) of person(s) making statement).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public