

**STATE OF MINNESOTA
COUNTY OF HENNEPIN**

**DISTRICT COURT
FOURTH JUDICIAL DISTRICT**

No. _____

In the Matter of the Petition of

ORDER TO SHOW CAUSE

in Relation to Certificate of Title No. _____
issued for land in the County of Hennepin and
State of Minnesota and legally described as
follows:

TO:

Upon receiving and filing the Report of the Examiner of Titles in the above-entitled matter, IT IS ORDERED, that you, and all persons interested, appear before this Court on the _____ day of _____, _____, at 2:00 p.m. in Room A-702 of the Hennepin County Government Center, and then, or as soon thereafter as the matter can be heard, show cause, if there is any, why this Court should not enter an Order as follows:

Attendance is required only by those who wish to object to the entry of the above-described Order.

IT IS FURTHER ORDERED, that this Order to Show Cause be served:

(a) at least 10 days before the hearing upon the above-named parties residing in this State in the manner provided by law for the service of Summons in a civil action;

(b) at least 14 days before the hearing upon each of the above-named nonresidents by sending a copy of this Order to the nonresident's post office address, by registered or certified mail, return receipt requested;

(c) upon each of the above-named parties who cannot be found by two weeks published notice and by sending a copy of this Order at least 14 days before the hearing by first class mail to the last known address of the party and by sending another copy of this Order at least 14 days before the hearing by first class mail to the address of such party as stated on the Certificate of Title if an address is so stated;

(d) upon a dissolved, withdrawn, or revoked business entity governed by Minn. Stat., Chp. 302A, 303, 317A, 322A, 322B, or 323 in the manner provided by Minn. Stat. § 5.25. [Note: return date on the Order to Show Cause must be at least 30 days after date of mailing by the Secretary of State]

Approved: Kimball Foster.
Examiner of Titles

Dated: _____

By: _____
Deputy Examiner

JUDGE OF THE DISTRICT COURT

Attorney for Petitioner

Address

City, State, Zip Code

Phone No.

Fax No.