



You must use black ink to fill out this form.

2.  **SPOUSAL and MEDICAL/DENTAL SUPPORT**

A.  I request reasonable spousal maintenance as follows:

Amount: \$ \_\_\_\_\_ How often:  per week  per month

Type of payment:  Cash  Check  Other: \_\_\_\_\_

Method of payment:  Mail to me  Deposit in Bank  Give to me  Other: \_\_\_\_\_

B.  I request an order requiring my spouse to provide available medical and dental insurance for me and to pay \_\_\_\_\_% of all uninsured medical and dental expenses reasonably incurred by me for myself. I have attached a completed *Financial Declaration*, DR-250 [PDF](#) | [Fill-In PDF](#).

I need this support, and it is fair and just for me to get this support because:

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3.  **USE OF MARITAL RESIDENCE**

I request interim use of the marital residence located at \_\_\_\_\_ and that my spouse be ordered to vacate the marital residence while this case is pending. It is fair and just for me to use the marital home because: \_\_\_\_\_

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4.  **USE OF VEHICLE**

I request an order for use of the following vehicle while this case is pending:

Make: \_\_\_\_\_ Model: \_\_\_\_\_

Year: \_\_\_\_\_ Color: \_\_\_\_\_

VIN # (if known): \_\_\_\_\_

It is fair and just for me to have use of this vehicle because: \_\_\_\_\_

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

5.  **OTHER RELIEF**

I request other temporary relief as follows: \_\_\_\_\_

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

More pages are attached and incorporated by reference.

6.  **I request a hearing on this *Motion*.**

7. **I have attached the following documents:** *Check all that apply.*

My completed *Financial Declaration*, DR-250 [PDF](#) | [Fill-In PDF](#). (*Required if you checked #1 or 2.*)

proposed *Interim Orders*, SHC-1107 SHC-1107 [Word](#) | [PDF](#) (*Required; fill out as if judge is granting you what you asked for in this motion, but DO NOT sign*)

Other: \_\_\_\_\_

I swear or affirm that the above facts and statements are true to the best of my knowledge.

\_\_\_\_\_  
*Your Signature* (in blue ink if possible)

Subscribed and sworn to or affirmed before me at \_\_\_\_\_, Alaska on \_\_\_\_\_,  
*Name of City, Town or Village*  
*Date*

(SEAL)

\_\_\_\_\_  
Notary Public or other person authorized to administer oaths.

My commission expires on \_\_\_\_\_

**You MUST fill out the certificate of service on the next page!**

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**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_, I gave a copy of the *Motion and Affidavit For Interim Orders* and papers listed in No. 7 to the following:

Opposing Party \_\_\_\_\_

Opposing Lawyer \_\_\_\_\_

Other \_\_\_\_\_

by  mail  hand delivery  served with the *Complaint* (if served with the *Complaint* you cannot show a date of service here)

Your signature: \_\_\_\_\_