

**You must use black ink to fill out this form.**

Your Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Message phone: \_\_\_\_\_

Email: \_\_\_\_\_

**NOTE: If for any reason you do not wish the other party to know your physical address, you must provide a mailing address so that the court and the other party can serve you by mail.**

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA

AT \_\_\_\_\_  
*City or Town where Court is located*

\_\_\_\_\_  
Plaintiff, )  
 )  
vs. )  
 )  
\_\_\_\_\_  
Defendant. )  
\_\_\_\_\_ )

Your Case No. \_\_\_\_\_

**ORDER**

ON  PLAINTIFF'S  DEFENDANT'S MOTION FOR \* \_\_\_\_\_

*\*Name of Motion that goes with this Order*

Having considered the  Plaintiff's  Defendant's *Motion* and any *Opposition* filed, and good cause being found, the Court ORDERS:

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

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
Judge \_\_\_\_\_

I certify that on \_\_\_\_\_ a copy of the above was mailed to each of the following:  Plaintiff  Defendant at their addresses of record.  CSSD/ AG  CI

\_\_\_\_\_  
Deputy Clerk / Secretary