

Person Filing Affidavit:

Name: _____ Daytime Telephone No. _____

Mailing Address: _____

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

vs.

Plaintiff,

Defendant.

) CASE NO. _____ CI

) **AFFIDAVIT IN SUPPORT OF**

) **MOTION FOR**

) **OPPOSITION TO MOTION FOR**

I do solemnly swear or affirm that the facts set out below are true to the best of my knowledge:

Date

Signature of Person Making this Affidavit

Print Name

Subscribed and sworn to or affirmed before me at _____, Alaska
on _____.

(SEAL)

Clerk of Court, Notary Public, or other person
authorized to administer oaths.
My commission expires _____