

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA

AT _____

(City or town where the court is located)

Plaintiff,)
v.)

Defendant.)
_____) Case No. _____

**OPPOSITION & AFFIDAVIT TO
MOTION FOR JUDGMENT
ON THE PLEADINGS**

I, _____, request that the court deny the *Motion for Judgment on the Pleadings* because there should be a trial to consider all disputed facts before deciding this case.

Affidavit of Disputed Facts

1. **Disagreed Facts.** I oppose the *Motion for Judgment on the Pleadings* because there are facts in dispute that are important to decide who should win the case. I have personal knowledge about the following disputed facts: (*List the facts that the other side presented that you disagree with, and explain how you can prove these facts – just stating you disagree without explaining your proof is not enough.*)

More pages are attached.

2. **Request of the Court.** The court should deny the *Motion for Judgment on the Pleadings* because the court should have a trial to consider the disputed facts before deciding this case.
3. **Hearing.** I would like to have a hearing about this *Opposition*. (*The court is not required to have a hearing, so your Motion must include all of your facts and argument.*)

4. **Attached Documents** I have included the following documents with this *Motion*:

- Order on Motion for Summary Judgment, CIV-853--REQUIRED*
(The judge will sign your proposed order if it is granted.)
- Additional *Affidavit(s)* from people that support the facts that I stated above, [CIV-825](#)
- Other documents that support this *Motion*: _____

Print Name _____

Mailing Address _____ City _____ State _____ ZIP _____

Phone _____ Email* _____

* I authorize the court to email me court documents in this case to the email address above.

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

Your Signature

Subscribed & 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: _____

Certificate of Service

I certify that on the following date _____ a copy of this *Opposition* and the following attached documents:

were mailed hand delivered to:

Opposing Party _____ Opposing Lawyer _____

Other _____ Other _____

Your signature: _____