

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA

AT _____
(City or town where the court is located)

_____)	
)	
Plaintiff,)	
v.)	
)	
_____)	Case No. _____
Defendant.)	
_____)	

**MOTION & AFFIDAVIT
FOR SUMMARY JUDGMENT**

I, _____, request that the court grant this *Motion for Summary Judgment* because there are no genuine disagreements about the material facts, and I should win under the law as explained in my affidavit, below.

Affidavit of Undisputed Facts

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

1. **Agreed Facts.** The other party agrees with the following facts or cannot prove they are false. Since the following relevant facts are not disputed, I should win this case. (*List the facts that the other party agrees with or cannot prove are false that show you should win.*)

☐ More pages are attached.

2. **Request of the Court.** The court should grant the *Motion for Summary Judgment* because there are no disputed relevant facts. The court has all the factual information it needs to decide the case so a trial is not necessary.
3. **Hearing.** ☐ I would like to have a hearing about this *Motion*. (*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-843](#)--REQUIRED*
(*The judge will sign your proposed order if it is granted.*)
- ☐ Additional *Affidavit(s)* from people that support the facts and law that I stated above,
[CIV-825](#)
- ☐ Other documents that support this *Motion*: _____

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

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 *Motion* and the following attached documents:

were ☐ mailed ☐ hand delivered to:

☐ Opposing Party _____ ☐ Opposing Lawyer _____

☐ Other _____ ☐ Other _____

Your signature: _____