

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

STATE OF ALASKA)

)

Plaintiff,)

vs.)

Defendant.)

CASE NO. _____ CR

DOB: _____)

REQUEST AND ORDER
FOR _____

REQUEST

[Type or print neatly]

CERTIFICATION. I certify that this document and its attachments do not contain (1) the name of a victim of a sexual offense listed in AS 12.61.140 or (2) a residence or business address or telephone number of a victim of or witness to any crime unless it is an address used to identify the place of the crime or it is an address or telephone number in a transcript of a court proceeding and disclosure of the information was ordered by the court.

I, _____, request that _____

Reason: _____

Date

Defendant's Signature

Mailing Address (include City, State, ZIP): _____

Daytime Phone: _____ Email: _____

[NOTE: If you are an attorney filing this form, you **must** attach a certificate of service with this request. The court will only perform service for self-represented defendants.]

PROSECUTOR'S REPLY (not necessary)

Prosecutor does does not oppose this request. Reason: _____

Date

Prosecutor's Signature

ABA #

ORDER

Hearing ordered. Date: _____ Time: _____ Courtroom: _____

Request granted. Request denied.

Date

Judicial Officer

Type or Print Name

I certify that on _____, a copy of this order was given or sent to:

Pros Deft/Atty PED Local Jail Local Police/VPSO/Village: _____ AST DPS

ASAP DMV CWS DVIP Collections TCA _____ Clerk: _____