

Your Name: _____

Mailing Address: _____

Telephone: _____ Message phone: _____

NOTE: If for any reason you do not wish the other party to know your physical address, you must still 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 the Court is located

_____))
 Plaintiff,))
 v.))
 _____))
 Defendant.))
 _____))

Your Case No. _____

MOTION AND AFFIDAVIT FOR INTERIM ORDERS (no minor children)

NOTE: *If you serve this motion with the Complaint, the other parent's opposition is due on the same day as the Answer, which is 20 days after service of Complaint. If you serve this motion after the Complaint, the opposition is due with the Answer OR after 10 days + 3 if mailed – whichever is later. You have the right to file a reply 5 days (+3 for mailing) after a copy of the opposition is mailed to you. For more information about motions, see <http://courts.alaska.gov/shc/family/motions.htm> or call the Helpline at 907-264-0851.*

I, _____, request that the court make interim orders as
(Print your full name here)
authorized by AS 25.24.140.

1. ATTORNEY'S FEES & COSTS

I request that attorney's fees and costs reasonably necessary to retain legal advice in this action in the amount of \$ _____ be awarded. I may need additional funds once the retainer has been spent. I have attached a completed *Financial Declaration*, [DR-250](#) [Fill-In PDF]. It is fair and just for the other party to pay my attorney's fees because:

You must use black ink to fill out this form.

2. **SPOUSAL and MEDICAL/DENTAL SUPPORT**

A. I request reasonable spousal maintenance as follows:

Amount: \$_____ How often: per week per month

Type of payment: Cash Check Other: _____

Method of payment: Mail to me Deposit in Bank Give to me Other: _____

B. I request an order requiring my spouse to provide available medical and dental insurance for me and to pay _____% of all uninsured medical and dental expenses reasonably incurred by me for myself. I have attached a completed *Financial Declaration*, [DR-250](#) [Fill-In PDF]. I need this support, and it is fair and just for me to get this support because:

3. **USE OF MARITAL RESIDENCE**

I request interim use of the marital residence located at _____ and that my spouse be ordered to vacate the marital residence while this case is pending. It is fair and just for me to use the marital home because: _____

4. **USE OF VEHICLE**

I request an order for use of the following vehicle while this case is pending:

Make:_____ Model:_____

Year:_____ Color:_____

VIN # (if known):_____

It is fair and just for me to have use of this vehicle because: _____

You must use black ink to fill out this form.

5. **OTHER RELIEF**

I request other temporary relief as follows: _____

More pages are attached and incorporated by reference.

6. **I request a hearing on this *Motion*.**

7. **I have attached the following documents:** *Check all that apply.*

- My completed *Financial Declaration*, [DR-250](#) [Fill-In PDF]. (*Required if you checked #1 or 2.*)
- proposed *Interim Orders*, SHC-1107 SHC-1107 [Word](#) | [PDF](#) (*Required; fill out as if judge is granting you what you asked for in this motion, but DO NOT sign*)
- Other: _____

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

Your Signature (in blue ink if possible)

Subscribed and sworn to or affirmed before me at _____, Alaska on
_____.
Date *Name of City, Town or Village*

(SEAL)

Notary Public or other person authorized to administer oaths.

My commission expires on _____

You MUST fill out the certificate of service on the next page!

You must use black ink to fill out this form.

CERTIFICATE OF SERVICE

I certify that on _____, I gave a copy of the *Motion and Affidavit For Interim Orders* and papers listed in No. 7 to the following:

Opposing Party _____

Opposing Lawyer _____

Other _____

by mail hand delivery served with the *Complaint* (if served with the *Complaint* you cannot show a date of service here)

Your signature: _____