

You must use black ink to fill out this form.

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 Court is located

_____)
_____)
Plaintiff, _____)
_____)
vs. _____)
_____)
_____)
Defendant. _____)
_____)

Your Case No. _____

MOTION, AFFIDAVIT & ORDER TO APPEAR & TESTIFY BY TELEPHONE

I, _____, request to appear and testify by telephone at:
(Print your full name here)

- all hearings / trial, OR
- hearing / trial on _____
(Write date & time here)

because: _____

More pages are attached.

The court can call me at the following telephone number: _____
(write phone # with area code)

(If you do not have a telephone number that can safely be revealed to the opposing party, ask the Family Law Self-Help Center or the court clerk how you can provide this information so that it will be kept confidential.)

Other: _____

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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 _____,
Name of City, Town or Village

Alaska on _____.
Date

Notary Public or other person authorized to administer oaths.
My commission expires on _____.

Certificate of Service (to be filled out by person filing the motion)

I certify that on _____ a copy of this *Motion & Affidavit to Appear & Testify by Telephone* and proposed *Order* was mailed hand delivered to:

Opposing Party _____ Opposing Lawyer _____
 AG _____ CI _____ Other _____

Your signature: _____

ORDER ON MOTION TO APPEAR & TESTIFY BY TELEPHONE

Having considered the *Motion & Affidavit* and any *Opposition* filed, and finding good cause and no substantial prejudice to the opposing party, the Court ORDERS:

The Plaintiff's Defendant's request to appear by telephone for all hearings / trial the hearing / trial on _____ at _____ is:
(date of hearing / trial) *(time of hearing / trial)*

Granted.

The court will call you at the telephone number provided in your motion. Wait by the telephone for up to 2 hours after the hearing/trial start-time for the call because your case may be delayed by prior cases.

You need to call the court at the following number: _____

Other: _____

Denied. To testify, you must appear in court at the above date and time.

Date

Superior Court Judge

Certificate of Distribution (to be filled out by court staff)

I certify that on _____ a copy of the above was mailed to each of the following at their addresses of record: Plaintiff _____ Defendant _____ AG CI Other _____

Deputy Clerk / Judicial Assistant