

You must use black ink to fill out this form.

Your Name: _____

Mailing Address: _____

Telephone: _____ Message phone: _____

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA

AT _____
City or Town where the Court is located

_____)	
Plaintiff,)	
)	
vs.)	
)	
_____)	
Defendant.)	
_____)	Your Case No. _____

DECREE TO DISESTABLISH PATERNITY

IT IS HEREBY ORDERED, ADJUDGED AND DECREED as follows:

1. _____ is not the father of the following child(ren):

Name	Date of Birth
_____	_____
_____	_____
_____	_____

2. _____'s name should be removed from the birth certificate of the above named child(ren).

3. _____ has no custody or visitation rights to the above named child(ren).

4. _____ has no ongoing responsibility to pay child support for the above named child(ren).

5. Other: _____

(Date)

(Judge's signature)
Judge _____
(Judge's name printed out)

I certify that on _____
a copy of this document was sent to Plaintiff Defendant Other _____
Clerk: _____