Your Name:	<u>-</u>
Mailing Address:	-
Telephone:Message phone:	
Email:	
NOTE: If you do not wish the other party to know your physical a you still must provide a mailing address so that the court and the party can serve you by mail.	
IN THE SUPERIOR COURT FO AT	
City or Town where th	e Court is located
Plaintiff,) v.)	
Defendant.	
)	Your Case No.
OBJECTIONS TO PARENTING COOF	RDINATOR DECISION (& ORDER)
I,, object to th (Print your name here)	e Parenting Coordinator's decision made on
(Date of Parenting Coordinator decision)	
The Parenting Coordinator decided:	
☐ I have attached the Parenting Coordinator's writte	n decision (required).
I disagree with this decision because:	
I ask the court to make the following decision:	

☐ I need a decision on the Objection by	because
☐ I request a hearing.	
Date	Your Signature (In blue ink if possible)
CERTIFICATE OF SERVICE	
I certify that ona copy of this Request for Hearing was _ mailed	
	f ☐ Defendant ☐ Plaintiff's Lawyer ☐ Defendant's
Lawyer Parenting Coordinator Other	
Your signature:	

(section below is to be filled out by the judge) IN THE SUPERIOR COURT FOR THE STATE OF ALASKA AT

ΑT City or Town where the Court is located Plaintiff, ٧. Defendant. Your Case No. ORDER on OBJECTIONS TO PARENTING COORDINATOR DECISION The parent who did not file the Objection shall file a response by (date) ______. Based upon the filing(s), the Parenting Coordinator's decision is: UPHELD and remains in effect. VACATED and is no longer in effect. REMAINS IN EFFECT until further order of this court. The Judge will issue a decision without a hearing. A hearing is scheduled for: Date: Time: Location: Superior Court Judge Date Print or Type Name CERTIFICATE OF DISTRIBUTION OF ORDER BY COURT I certify that on _____a copy of this *Order* was __ mailed __ hand delivered __ emailed to: ☐ Plaintiff ☐ Defendant ☐ Plaintiff's Lawyer ☐ Defendant's Lawyer ☐ Parenting Coordinator

Deputy Clerk / JA

Other