## TYPE OR HAND PRINT NEATLY, USING BLACK INK ONLY

List court location, names of parties and case number exactly as shown on the motion.

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA AT
) ) ) ) ) ) CASE NO ) RESPONSE TO MOTION
PONSE
I agree with the Motion.
I do <b>not</b> agree with the Motion. Reason: (Attach any documents that support your response.)

2.	REQUIRED ATTACHMENTS. Each of the forms listed below MUST be and attached to this Response. Check each box to indicate that you have compattached the form.			
	Child Shared shared	Support Guidelines Afd Custody Child Supdicustody has been ord	Affidavit (form DR-150) Fidavit (form DR-305) port Calculation (form DR-306) (Required only if lered or is being requested.) support your response to the motion.	
3.	B. PARENT INFORMATION			
NOTE: If for any reason you do not want the other parent to know your cur address or employer, you need not provide that information. However, you not provide a mailing address that will allow the court and the other parent to mail required documents. That address may be in care of another person as long as will receive all papers sent to you				
	Your full nam	ıe:	Date of birth:	
	Residence add	dress (if different):		
	Daytime phon	ne number:	Social Security No	
Most recent employer:				
	Dates of employment:			
Employer's address:				
OATH OR AFFIRMATION				
NOT for y	ΓΕ: You must you (at no charge	sign this in front of a ge). Bring a photo ID	notary. A court clerk can provide this notary service with you for the notarization.	
	ar or affirm the		nts and any attachments are true to the best of my	
	Date	e	Signature of Person Filing Response	
			Printed Name	
Subsci	ribed and sworn	n to or affirmed before		
on	Date	·		
(SEAI			Clerk of Court, Notary Public or other person authorized to administer oaths.  My commission expires:	
[You must complete the Certificate of Service on the next page.]				

## <u>CERTIFICATE OF SERVICE</u> [MUST BE COMPLETED]

I certify that I served a copy of my completed Response and all the documents checked in paragraph 2 as follows:

On Other Parent
I mailed (first class mail) hand delivered to the other parent (or his/her attorney if the other parent is represented by an attorney) a copy of my Response and all the documents checked in paragraph 2.
Name of Other Parent or Attorney:
Address:
On the Child Support Enforcement Division (Instructions: If the Child Support Enforcement Division (CSED) is enforcing the current child support order, you must send a copy of your Response and all the documents checked in paragraph 2 to the Attorney General's Office.)  I mailed (first class mail) hand delivered
a copy of my Response and all the documents checked in paragraph 2 to:
Attorney General's Office Collections and Support Section 1031 West Fourth Avenue, Suite 200 Anchorage, AK 99501
Date mailed or delivered:
Signature of Person Filing Response