You must use	black ink to fill out this fo	rm.
Plaintiff's Name:		
Mailing Address:		
Tolonhono	Magaganhana	
r elepriorie:	Message phone:	
Defendant's Name.	:	
Mailing Address:		
Telephone:	Message phone:	
		RT FOR THE STATE OF ALASKA where the Court is located
	,)
Plaintiff,)
vs.)))
Defendant) Coop No
Defendant.) Case No
JOINT MOT	TION FOR * *Name This Document: Give	this Motion a title describing what you want
We,	, request that	
Print your	full names here	
BECAUSE		
DECAUGE		
		hy in your <i>Affidavit</i> s <i>and Memorandums</i> .)
More pages a	are attached and incorporated by re	eference.
	e following documents with this and Memorandums (REQUIRED)	Motion: A proposed Order for the Judge to Sign (REQUIRED)
Other:		
Date		Plaintiff's Signature (In blue ink if possible)
Date		Defendant's Signature (In blue ink if possible)