

5. The following specific facts will, when proven, state a claim on which relief can be granted or entitle me to reversal on appeal:

Date Prisoner's Signature

Subscribed and sworn to or affirmed before me at _____, Alaska on

(date)
(SEAL)

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

ORDER

It is ordered that the above request is

- GRANTED. The court finds that exceptional circumstances prevent the prisoner from paying the full filing fee. The required filing fee will be \$ _____ (Minimum required by AS 09.19.010(d) is 20% of the larger of average monthly deposits to or average balance in prisoner's account.)
- DENIED. The court finds that no exceptional circumstances prevent the prisoner from paying the full filing fee.

Notice: This case may be dismissed without further notice unless the required filing fee is paid within 30 days after the date of distribution of this order.

Date Judge

I certify that on _____
a copy of this order was sent to:

Type or Print Name

Clerk: _____