

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

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Case No. \_\_\_\_\_

**MOTION FOR ORDER TO BE FORWARDED TO THE FEDERAL GOVERNMENT  
TO RELIEVE ME FROM NOT BEING ABLE TO POSSESS FIREARMS**

1. I request relief from not being able to possess firearms or ammunition under federal law. My personal information appears on the next page.
2. I am not currently allowed to possess firearms or ammunition because a court in Alaska committed me involuntarily for 30 days or more, or found me to be mentally ill or mentally incompetent. The date of that court order was: \_\_\_\_\_. That case number is above.  
 This happened in more than one case. The other case numbers are:  
\_\_\_\_\_  
\_\_\_\_\_
3. I request that the court relieve me from the legal disability of not being able to possess firearms and forward the order to the Department of Public Safety so that the restriction on me can be removed because:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. I request that any hearing about my request be  open  closed to the public.
5. I understand that even if the court grants my request, it is ultimately up to the Department of Public Safety and the federal government to update the information in their records to show that I am authorized to possess firearms or ammunition.

_____ Today's Date	_____ Signature
_____ Address Line 1	_____ Printed Name
_____ Address Line 2	_____ Daytime Phone Number

For Court Clerk: I certify that on \_\_\_\_\_ I gave a copy of this *Motion* to the following agencies and attorneys who appeared in the underlying case:

\_\_\_\_\_  
\_\_\_\_\_

By Court Clerk: \_\_\_\_\_

**Requestor's personal information is as follows:**

Full name: \_\_\_\_\_  
                                first name                                  MI                                  last name

Other names used in the past, if any: \_\_\_\_\_

Date of birth:   \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_   Social Security #: \_\_\_\_\_  
                                month    day    year

Driver's license number or state ID card number: \_\_\_\_\_/\_\_\_\_\_  
  number                                  issuing state

Clerk: Enter **all** information from this page into CourtView and store in the TF-350, *Confidential Envelope*.