## IN THE SUPERIOR COURT FOR THE STATE OF ALASKA AT \_\_\_\_\_

	RESPONSE TO REQUEST	
Appellee	) ) APPEAL CASE NO	CI
vs.	) )	
Appellant (person bringing appeal)	) ) )	

[Note: This response must be filed with the court within 7 days after the date shown in the clerk's certificate of distribution on the Request (form AP-135). If the Request was mailed to you, you have an additional 3 days to file this response.]

L		I
L		I
L		I

I do not oppose the attached request.

I oppose the attached request for the following reasons:

Date	Signature	Signature of Appellant/Appellee			
I certify that on					
a copy of this response was	Print Name	Print Name and Title (if applicable)			
to (list names):	Mailing Address				
Ву:	City	State	ZIP		
	Home Phone	W	ork Phone		

*Instructions: Return the original of this document to the court. Send one copy to the opposing party. Keep one copy for your records.* 

AP-140 (1/12)(cs) RESPONSE TO REQUEST