

State of North Dakota

In District Court

County of \_\_\_\_\_

\_\_\_\_\_ Judicial District

_____	)	
Plaintiff,	)	Case No. _____
vs	)	
	)	<b>Declaration in Support of</b>
_____	)	<b>Motion to Prohibit Public</b>
Defendant.	)	<b>Access</b>

My name is \_\_\_\_\_. I understand that I must tell the truth.

1. I am the (*choose one*) ☐ Plaintiff ☐ Defendant ☐ Victim ☐ Other (*if you chose "other", state relationship*) \_\_\_\_\_ in the above-named case.

2. This case is for (*state type of case*) \_\_\_\_\_.

3. I am asking the Court to issue an Order (*select the same options as Paragraph 11 of your Brief in Support of Motion to Prohibit Public Access*):

- ☐ a. Prohibiting access to the entire above-named case.
- ☐ b. Restricting access to the documents named in the Brief.
- ☐ c. Redacting the information from documents filed in the above-named case as requested in the Brief.

4. I have sustained or am likely to sustain the following harms because the records have remained open to the public (*explain the harm or harms you have sustained or are likely to sustain. See Paragraphs 8 and 9 of your Brief in Support of Motion to Prohibit Public Access; Paragraph 4 continues on page 2*):

***(Paragraph 4 continued.)***

5. My request to prohibit public access will protect me from further harm because  
(*explain. See Paragraphs 11 and 12 of your Brief in Support of Motion to Prohibit Public Access*):

6. My request that the documents be labeled (*check one*) ☐ sealed/☐ confidential under [N.D.Sup.Ct.Admin.R. 41, Section 4\(a\)](#) and [N.D.R.Ct. 3.4\(c\)](#) is justified because (*explain. See Paragraph 10 of your Brief in Support of Motion to Prohibit Public Access*):

7. I declare, under penalty of perjury under the law of North Dakota, that everything I stated in this Declaration is true and correct.

Signed on \_\_\_\_\_ (*date*) in \_\_\_\_\_ (*city*),  
\_\_\_\_\_ (*county*), \_\_\_\_\_ (*state*), \_\_\_\_\_ (*country*).

\_\_\_\_\_  
(*Signature*)

\_\_\_\_\_  
(*Printed Name*)

\_\_\_\_\_  
(*Address*)

\_\_\_\_\_  
(*City, State, Zip Code*)

\_\_\_\_\_  
(*Telephone Number*)

\_\_\_\_\_  
(*Email Address*)