Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE JUDICIAL DISTRICT

FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF

|  |  |
| --- | --- |
| ,  Plaintiff,  vs.  ,  Defendant. | Case No.  ORDER ON MOTION TO RETAIN CASE |

⬜ The Motion to Retain is denied.

⬜ IT IS ORDERED that this case is not dismissed.

⬜ The following action must be completed:

.

⬜ If the above is not done by (date) , this case will be dismissed without further notice unless an additional Motion and Affidavit to Retain is filed.

Date:

Judge

CLERK’S CERTIFICATE OF SERVICE

I certify that a copy of this Order was served:

|  |  |
| --- | --- |
| (Name)    (Street or Post Office Address)    (City, State, and Zip Code) | * By United States mail * By personal delivery * By fax (number) |
| (Name)    (Street or Post Office Address)    (City, State, and Zip Code) | * By United States mail * By personal delivery * By fax (number) |
| Date: | Deputy Clerk |