Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

vs.

IN THE DISTRICT COURT FOR THE \_\_\_\_\_\_ JUDICIAL DISTRICT FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF \_\_\_\_\_

Plaintiff,

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

NOTICE OF APPEARANCE

Defendant.

Fee Category:	l
Filing Fee: \$	
-	

TO: CLERK OF THE ABOVE DISTRICT COURT

I represent myself. All pleadings, motions, notices, or other papers should be served on me. I certify I served a copy:

To Other Party/Attorney

(Name)

(Street or Post Office Address)

By mail
By fax (number)
By personal delivery
Overnight delivery/Fed Ex

(City, State, and Zip Code)

Date:

Signature

Typed/printed name