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,

JUDGMENT OF DISMISSAL

Case No. _____

Defendant.

JUDGMENT IS ENTERED AS FOLLOWS:

This action is dismissed.

Date:

Judge

CLERK'S CERTIFICATE OF SERVICE

I certify that a copy of this Judgment was served:

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