
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. _____
MOTION TO RENEW JUDGMENT

I, _____ ask the court to renew the judgment entered/
renewed on (date judgment entered/renewed) _____, because the
judgment has not been paid in full. Time to renew has not expired, according to Idaho Code
Section 10-1111. Judgment was originally for \$ _____.

Date: _____

Typed/printed

Signature

CERTIFICATE OF SERVICE

I certify that on (date) _____ I served a copy to: (name all parties in the case other than yourself)

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

- By United States mail
- By personal delivery
- By fax (number) _____
- By email to: _____

(if allowed)

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

- By United States mail
- By personal delivery
- By fax (number) _____
- By email to: _____

(if allowed)

Typed/printed name

Signature