
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 _____
SMALL CLAIMS DEPARTMENT

Plaintiff(s),
vs.

Defendant(s).

Case No. _____

SATISFACTION OF JUDGMENT
(PLAINTIFF)

I, _____, am the Plaintiff in this case, or the Plaintiff is a
business organization and I am an owner or an employee of the Plaintiff. A
judgment was entered against the Defendant(s) in this case on _____ (date).

I acknowledge that the judgment has been satisfied in full.

CERTIFICATION UNDER PENALTY OF PERJURY

I certify under penalty of perjury pursuant to the law of the State of Idaho that the
foregoing is true and correct.

Date: _____

Typed/printed name

Signature