
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. _____

AFFIDAVIT OF NON-COMPLIANCE

I, (print your name) _____, hereby certify under penalty of perjury that on (date agreement signed) _____, (print other party's name) _____ and I signed a Memorandum of Agreement.

(print other party's name) _____ has not complied with the Memorandum of Agreement by failing to do the following: _____

Or

(print other party's name) _____ has partially complied with the Memorandum Agreement by: _____

Based upon these facts, I/We ask that Judgment be entered against the Defendant in the amount of \$_____.

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