

\_\_\_\_\_  
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. \_\_\_\_\_

DISMISSAL BY PLAINTIFF

The Plaintiff acknowledges full satisfaction of the claim, and dismisses the claim in this case.

The Defendant has not filed an answer, and the Plaintiff dismisses the claim in this case without prejudice pursuant to I.R.C.P. 41(a)(1).

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature