
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. _____

WRIT OF EXECUTION
ON SMALL CLAIMS JUDGMENT

THE STATE OF IDAHO to the Sheriff of the County of _____
Greetings:

On _____, the Plaintiff(s) recovered a judgment against the
Defendant(s) in this case for:

TOTAL SUM OF JUDGMENT:	\$ _____
Amount(s) paid by Defendant(s):	\$ _____
Plus accruing costs:	\$ _____
Plus accrued interest:	\$ _____
Total amount now due and owing:	\$ _____

You, THE SHERIFF, are required to satisfy the judgment, with post-judgment interest accruing at the legal rate and accruing costs, out of the personal property of: (Defendant's name) _____ and make return of this writ within sixty (60) days after receipt of this writ.

Date: _____

CLERK OF THE DISTRICT COURT

By: _____
Deputy