
Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

IN THE DISTRICT COURT FOR THE SECOND JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF LATAH

Plaintiff,
vs.

Defendant.

Case No. _____

MOTION AND AFFIDAVIT
TO RETAIN

I, _____ Plaintiff Defendant, ask this court to keep this case open.

I swear under oath the case should not be dismissed because: _____

_____.

Date: _____

Typed/printed

Signature

SUBSCRIBED AND SWORN before me on this _____ day of _____

Notary Public for Idaho
Residing at _____
Commission expires _____

CERTIFICATE OF SERVICE

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

(Name)

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

(Street or Post Office Address)

(City, State, and Zip Code)

(Name)

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

(Street or Post Office Address)

(City, State, and Zip Code)

Typed/printed name

Signature