
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

Petitioner,

vs.

Respondent.

Case No. _____

FAMILY CASE RESPONSE
(NO CHILDREN)

Fee Category: _____

Filing Fee: \$_____

(Your name) _____, for his/her Response to the _____

_____, states:

1. I completely agree with and admit the following paragraphs (list each paragraph number):

2. I admit the portion of paragraph _____, that states: _____

_____ and I deny everything else in that paragraph.

3. I admit the portion of paragraph _____, that states: _____

 _____ and I deny everything else in that paragraph.
4. I deny the following paragraphs because I do not have enough information to admit or deny them (list each paragraph number): _____
5. I completely disagree with and deny everything I do not admit.
6. I want the Petition dismissed.

AFFIRMATIVE DEFENSE(S)

(State each affirmative defense that applies in a separate paragraph – see I.R.F.L.P. 208(C))

I swear I have read this Response and state that all facts included are true.
 I ask the Court to enter any order requested above.

Date: _____

 Signature of Respondent

SUBSCRIBED AND SWORN to before me this _____ day of _____

 Notary Public for Idaho
 Residing at _____
 My 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)

(Street or Post Office Address)

(City, State, and Zip Code)

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

(Name)

(Street or Post Office Address)

(City, State, and Zip Code)

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

Typed/printed name

Signature