
Full Name of Party Filing this Document

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City, State, and Zip Code

Telephone Number

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

_____,
Plaintiff,
vs.
_____,
Defendant.

Case No.: _____

NOTICE OF HEARING

PLEASE TAKE NOTICE that the _____ filed
herein on the ____ th day of _____, 20____, by _____, will
come on for hearing on the ____ day of _____, 20____, at _____ o'clock p.m.,
in the Magistrate's Division of the District Court, Latah County Courthouse, located at 522 S.
Adams (6th and Van Buren) in Moscow, Idaho.

Plaintiff/Defendant requests oral argument, and the right to cross-examine Defendant/
Plaintiff and/or his/her witnesses at such hearing.

Date: _____

Signature

Typed/Printed Name

CERTIFICATE OF SERVICE

I certify I served a copy to: (name all parties or their attorneys in the case, other than yourself)

(Name)

By Mail

(Street or Post Office Address)

By fax

(City, State, and Zip Code)

By personal delivery

(Name)

By Mail

(Street or Post Office Address)

By fax

(City, State, and Zip Code)

By personal delivery

Date: _____

Signature