
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(s),

vs.

Defendant(s).

Case No. _____

MEMORANDUM OF COSTS

I swear under oath:

That I am the above named Plaintiff; that to the best of my knowledge and belief the items of costs and in this action are correct and necessarily incurred in this action.

That I have read the Complaint filed in this action and know the contents; that the allegations are true to the best of my knowledge; that the Defendant(s) is/are not minor(s) nor incompetent; that the Defendant(s) was/were properly served, and now owe to the Plaintiff(s) the following amount:

FILING FEE	\$	_____
SERVICE OF PROCESS	\$	_____
OTHER	\$	_____
TOTAL	\$	_____

Date: _____

Signature

STATE OF IDAHO)
) ss.
County of _____)

SUBSCRIBED AND SWORN before me on this _____ day of _____

Notary Public for Idaho
Residing at _____
Commission expires _____