
Full Name of Plaintiff

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

Full Name of Defendant

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. _____

MEMORANDUM OF AGREEMENT
AND STIPULATED ORDER

At the time set for the hearing of the above claim the above parties met in mediation and reached an agreement with the following terms: _____

STIPULATED ORDER

The parties having met and reached agreement on the above terms and conditions, the same is hereby adopted as an Order of this Court.

Date: _____

Small Claims Department of the
District Court, Magistrate Judge