Full Name of Party Filing Document	
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 T	THE COUNTY OF
SMALL CLAIMS	DEPARTMENT
	Case No.
Plaintiff(s), vs.	ORDER ON MOTION TO CONTINUE (RESCHEDULE) HEARING
Defendant(s).	
The Plaintiff Defendant (check one) file	d a motion asking the court to continue
(reschedule) the hearing in this case. The cou	ırt orders as follows:
☐ The motion to continue is denied.	
	Hearing is continued to (date)
Date:	Magistrate Judge
	iviagisti ate Juuge

CLERK'S CERTIFICATE OF SERVICE

I certify that a copy of this Order was served: By United States mail (Name) By personal delivery By fax (number)____ (Street or Post Office Address) By email to: (If allowed) (City, State, and Zip Code) By United States mail (Name) By personal delivery By fax (number) (Street or Post Office Address) By email to: (If allowed) (City, State, and Zip Code) By United States mail (Name) By personal delivery By fax (number)____ (Street or Post Office Address) By email to: (If allowed) (City, State, and Zip Code) By United States mail (Name) By personal delivery By fax (number) (Street or Post Office Address) By email to: (If allowed) (City, State, and Zip Code) Date:____ Deputy Clerk