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	EJUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR	THE COUNTY OF
	Case No.
, Plaintiff(s),	JUDGMENT FOR EVICTION
VS.	
, Defendant(s).	
JUDGMENT IS ENTERED AS FOLLOWS	S:
The possession of the premises described	d as
shall be restored to the Plaintiff(s), and the De	efendant(s) is/are hereby ordered to
immediately remove himself/herself/themselve	•
premises.	,
	rsements as allowed by Idaho Code in the
amount of \$, to be p	·
	ue to the Sheriff of this County to remove the
Defendant(s) from the premises.	·
Date:	
	JUDGE

## CLERK'S CERTIFICATE OF SERVICE

I certify that on (date)yourself)	I served a copy to: (name all parties in the case other than
(Name)  (Street or Post Office Address)	By mail By fax (number) By personal delivery Overnight delivery/Fed Ex
(City, State, and Zip Code)	
(Name)	By mail By fax (number) By personal delivery
(Street or Post Office Address)	Overnight delivery/Fed Ex
(City, State, and Zip Code)	
Typed/printed name	Deputy Clerk