illing Address (Street or Post Office Box)  y, State and Zip Code  ephone  ail Address (if any)  IN THE DISTRICT COURT FOR THE  OR THE STATE OF IDAHO, IN AND FOR THE COU  SMALL CLAIMS DEPART  Case  ANSV  Plaintiff(s),  vs.  1. If the Defendant's name is not spelled correctly  efendant's address or phone number are not correct of aim, fill out this portion.  fendant's Name  Address  City  2. If the Plaintiff's claim asks for a judgment for more and address  Address  Address  City  2. If the Plaintiff's claim asks for a judgment for more and address  Address  City  Countries  Address  City  City  Countries  Address  City  City  Countries  Address  City  Countries  City  Countries  Case  ANSV  Address  City  City  Countries  Countries  City  Countries  Countries  Countries  City  Countries  Countries  City  Countries  Countries			
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fendant's Name Address City			
·	State	Zip	Phone
2. If the Digintiff's claim cake for a judgment for me	State	Zip	Phone
<ul> <li>in the Plaintin's Claim asks for a monther for mo</li> </ul>	nev fill out this r	oortion	
you agree that you owe money to the Plaintiff?	•	, 51 (1011)	
ves, how much do you agree that you owe? \$			

If you believe that you do not owe the Pl	laintiff the amount claimed or any money, state
briefly why you do not owe the money.	
3. If the Plaintiff's claim seeks the re	eturn of personal property, fill out this portion.
Do you agree with the part of the Plainti	iff's claim asking for the return of personal
property? ☐ Yes ☐ No	
If not, state briefly why not.	
	FENDANT VERIFIES THAT the information above
is true and correct to the Defendant's be	est knowledge.
CERTIFICATION UN	IDER PENALTY OF PERJURY
	suant to the law of the State of Idaho that the
foregoing is true and correct.	adilities the law of the etate of idahe that the
Date:	
True and the signature of the company	Cinactura
Typed/printed name	Signature
Favor de avisarnos antes de la fecha de la a	audencia si usted necesitara un interprete en la corte.