

Full name of party submitting this document

Mailing address (street or post office box)

City, State and Zip Code

Telephone number

IN THE DISTRICT COURT OF THE \_\_\_\_\_ JUDICIAL DISTRICT  
OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF \_\_\_\_\_

\_\_\_\_\_,  
Plaintiff,  
vs.  
\_\_\_\_\_,  
Defendant.

Case No.: \_\_\_\_\_

AFFIDAVIT OF MAILING PURSUANT  
TO ORDER FOR PUBLICATION OF  
SUMMONS

STATE OF IDAHO            )  
  : ss  
County of \_\_\_\_\_)

I swear under oath: I am the Plaintiff in this action. On (month/day/year) \_\_\_\_\_,  
20\_\_\_\_, I mailed copies of the Summons and Complaint [ ] and Order to Attend parent  
education program [ ] Joint Temporary Restraining Order (Property) [ ] Joint Temporary  
Restraining Order (Children) to \_\_\_\_\_, the  
Defendant, at his/her last known address:

\_\_\_\_\_  
\_\_\_\_\_.

\_\_\_\_\_  
Plaintiff

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public for Idaho  
Residing at \_\_\_\_\_  
Commission Expires \_\_\_\_\_