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 THE COUNTY OF

|  |  |
| --- | --- |
|   , Plaintiff(s), vs.  , Defendant(s). | Case No. WRIT OF EXECUTION |

THE STATE OF IDAHO to the Sheriff of the County of , Greetings:

On (date)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (your name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ recovered a judgment against the Defendant(s) in this case for:

 TOTAL SUM OF JUDGMENT: $

 Amount(s) paid by Defendant(s): $

 Plus accruing costs: $

 Plus accrued interest: $

 Total amount now due and owing: $

YOU, the Sheriff, are required to satisfy the judgment, with post-judgment interest accruing at the legal rate and accruing costs, out of the personal property of (name of defendant) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and make return of this writ within sixty (60) days after receipt of this writ.

Date: CLERK OF THE DISTRICT COURT

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deputy