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 FOURTH JUDICIAL DISTRICT FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF ADA

STATE OF IDAHO Plaintiff,		Case No
VS		OBJECTION TO INTERCEPTED TAX RETURN IC §1-1624
Defendant	,	
I,	(insert full name), residing at	
		(insert full mailing address), hereby state that

I am submitting this Objection to Intercepted Tax Return within 21 days of the mailing date on the "Notice of State Income Tax Withholding and Diversion of Funds".

\Box I am the taxpayer obligated in the al	pove captioned case.	I am filing an objection to the
interception of my tax return because:		

Or

□ I filed a joint tax return in the State of Idaho with the taxpayer obligor identified in the above referenced matter for the year of ______. I am not specified to be the obligor in the judgment or agreement creating the debt owed to the court in the above captioned case. I hereby object to the interception of my portion of the joint return and petition the court to return my portion to me.

□ I am not delinquent. I have paid an amount equal to or more than I had agreed to pay to date.