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

SMALL CLAIMS DEPARTMENT

|  |  |
| --- | --- |
|   , Plaintiff(s), vs.  , Defendant(s). | Case No. DISMISSAL BY PLAINTIFF |

* The Plaintiff acknowledges full satisfaction of the claim, and dismisses the claim in this case.

⬜ The Defendant has not filed an answer, and the Plaintiff dismisses the claim in this case without prejudice pursuant to I.R.C.P. 41(a)(1).

Date:

 Signature