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,  vs.  ,  Defendant. | Case No.  NOTICE OF APPEARANCE  Fee Category: I.  Filing Fee: $ |

TO: CLERK OF THE ABOVE DISTRICT COURT

I represent myself. All pleadings, motions, notices, or other papers should be served on me. I certify I served a copy:

To Other Party/Attorney

|  |  |
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| (Name)    (Street or Post Office Address)    (City, State, and Zip Code) | * By mail * By fax (number) * By personal delivery * Overnight delivery/Fed Ex |
| Date: | Signature    Typed/printed name |