Full Name of Party Filing this Document

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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 SERVIC	
STATE OF)	I	
: ss County of)		
I swear under oath:		
I,eighteen (18) years, and not a party to the action		aho, over the age of
at o'clockm., on the	day of	, 20
at the following address:		
by personally handing or delivering a copy to		, or
handing or delivering a copy to		, a person of
suitable age (eighteen years) and discretion res	ding at the usual abode of th	ne person to be
served.		

DATE: _____

Affiant's Signature

Typed/Printed Name of Affiant

SUBSCRIBED AND SWORN TO before me on _____, 20_____.

NOTARY PUBLIC Residing at ______ My Commission Expires: ______