Full Name of Party Filing this Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone Number
IN THE DISTRICT COURT OF THE $\qquad$ JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF $\qquad$

Plaintiff,
VS.

Defendant.

STATE OF IDAHO
County of $\qquad$ ) ss. )

I swear:

1. I am the Plaintiff.
2. The community property division I asked for in my verified complaint is substantially equal, considering debts.
3. The provisions for custody of our child/ren are in his/her/their best interests and enable him/her/them to continue their relationship/s with both parents.
4. The child support amount was calculated using the Idaho Child Support Guidelines.
5. Briefly, the irreconcilable differences I have with my spouse are: $\qquad$
$\qquad$
6. These differences are irreconcilable because: $\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
7. A default divorce decree should be entered against my spouse based upon this affidavit and my verified complaint.
Date: $\qquad$

Plaintiff's signature
SUBSCRIBED AND SWORN to before me this $\qquad$ day of $\qquad$ _, 20 $\qquad$ .

Notary Public for Idaho
Residing at $\qquad$
Commission Expires $\qquad$

