_____ JUDICIAL DISTRICT, STATE OF IDAHO
_____ COUNTY
SMALL CLAIMS DEPARTMENT

FILED _____ AT_____.M
CLERK OF THE DISTRICT COURT
BY _____, Deputy

_____,)
)
_____,)
PLAINTIFF(S),)
vs.)
)
_____,)
)
_____,)
DEFENDANT(S))

CASE NO. _____

AFFIDAVIT OF SERVICE OF:
___ CLAIM
___ SUMMONS
___ ANSWER FORM
___ INFORMATION FOR DEFENDANTS
___ OTHER:

STATE OF IDAHO)
) ss:
County of _____)

Note: either use a separate form for each defendant served, or include information on this form as to how each defendant was served.

I, _____, being first duly sworn, depose and state:

I am over the age of 18 years, and I am not a party to this case nor an employee of a party to this case.

On _____ (date), I served true and correct copies of the documents indicated above on _____ (name of defendant) by:

___ Personal delivery to _____ (name of defendant) at _____ (location where process served).

___ Personal delivery to _____, a person over the age of 18 years, at _____, the usual place of residence of _____ (name of defendant).

___ Personal delivery to _____, the defendant's authorized agent for service of process, at _____ _____ (location where process served).

___ I am charging the plaintiff(s) $_____ for this service.

_____
Signature of Process Server

Subscribed and sworn to before me this date: _____.

_____
Deputy Court Clerk or Notary Public for Idaho
If Notary, my commission expires: