

CHAPTER 17

FORMS FOR SELF-REPRESENTED LITIGANTS

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CHAPTER 17

FORMS FOR SELF-REPRESENTED LITIGANTS

Rule 17.1 Use of forms; mandatory for self-represented litigants. An individual who is not represented by an attorney in a legal proceeding covered under this chapter must use forms contained in this chapter. An attorney may use these forms but is not required to do so.
[Court Order May 16, 2007; December 19, 2013]

Rules 17.2 to 17.99 Reserved.

Rule 17.100 Family law forms for dissolution of marriage without minor or dependent adult children. The following forms are for use in dissolution of marriage (divorce) actions without children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and still need support. These forms cannot be used if a spouse of the marriage is pregnant.

Form 101:	Petition for Dissolution of Marriage with no Minor or Dependent Adult Children
Form 102:	Petition Cover Sheet for a Dissolution of Marriage with no Minor or Dependent Adult Children
Form 103:	Confidential Information Form
Form 104:	Original Notice for Personal Service
Form 104a:	Original Notice for Personal Service
Form 105:	Acceptance of Service
Form 106:	Directions for Service of Original Notice
Form 107:	Motion and Affidavit to Serve by Publication
Form 108:	Original Notice by Publication
Form 109:	Application and Affidavit to Defer Payment of Costs
Form 110:	Affidavit of Service of Original Notice and Petition for Dissolution of Marriage
Form 111:	Protected Information Disclosure
Forms 112 to 114:	Reserved
Form 115:	Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children
Form 116:	General Answer to a Petition
Forms 117 to 121:	Reserved
Form 122:	Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children
Form 123:	Response to a Motion
Form 124:	Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children
Form 125:	Affidavit of Mailing Notice
Form 126:	Notice of Intent to File Written Application for Default Decree
Form 127:	Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children

Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or
Dependent Adult Children

Forms 129 to 200: Reserved

[Court Order December 19, 2013]

Rule 17.100—Form 101: *Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*

Read the [Guide to Representing Yourself in an Iowa Divorce Case](#) on the Iowa Judicial Branch website before using this form.

Do not use this form if any of the following are true:

- You are not married.
- Neither you nor your spouse has lived in Iowa for the last year before filing this Petition.
- Petitioner or Respondent is pregnant.
- There are children 18 years of age or older (born or adopted) who still need support (for example, the child is in high school or college, or is disabled).
- There are children under the age of 18 who are children (born or adopted) of both spouses before or during the marriage, even if Petitioner or Respondent is not the natural parent.

 *If filing electronically, you must provide any protected information in full on form 111.*

 *If filing in paper, you may use form 111 to provide any protected information in full.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where you are filing this Petition

In Re the Marriage of:

Your current legal name

Your spouse's current legal name

Upon the Petition of

Petitioner *Your full name: first, middle, last*

and concerning

Respondent *Your spouse's full name: first, middle, last*

For clerk's use only

Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

1. Personal Information *Fill in all information that you know. If you have been assaulted by your spouse and you fear for your safety, you may leave your street address, phone number, and email blank.*

A. Petitioner's (your) birth year and present residence: _____
Birth year

Petitioner's present street address _____ *City* _____ *State* _____ *ZIP code*

County _____ *Phone number* _____ *Email address*

B. Respondent's (your spouse's) birth year and present residence: _____
Birth year

Respondent's present street address _____ *City* _____ *State* _____ *ZIP code*

County _____ *Phone number* _____ *Email address*

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____)_____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.** Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.100—Form 101: *Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

2. General Information About the Marriage and the Parties

A. Date and location of the marriage

_____, _____, _____, _____, _____
Month Day Year City State

B. Children

Check all that are true

- (1) There are no children under the age of 18 who are children of both Petitioner and Respondent.
 (2) There are no children under the age of 18 who were adopted or born during this marriage.
 (3) There are no children 18 years of age or older who still need support.
 (4) Neither Petitioner nor Respondent is pregnant.

C. Petitioner's residence

You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce.

If you have questions about this, talk to an attorney.

- (1) The **only** reason that Petitioner (you are Petitioner) is living in Iowa is just to get a divorce.
 True
 False *If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False."*
- (2) Petitioner has lived in Iowa for the last _____ years and _____ months in _____ county.
 - *If you have always lived in Iowa, count the time since your birth.*
 - *If you have been a resident of another state, count the time since you last moved to Iowa.*

D. Parties' residence

Check each that is true

- (1) Petitioner has lived in Iowa for more than one year.
 (2) Respondent (your spouse) is a resident of Iowa.

E. Condition of the marriage

Check all that are true

- (1) The marriage is broken and cannot be saved.
 (2) This is the only divorce case going on involving this marriage.
If you did not check (2), explain in H. You should also talk to an attorney.
 (3) This Petition is being filed in good faith for the purpose of ending the marriage.
 (4) Counseling will not save the marriage. *If counseling may save the marriage, do not check (4).*

Rule 17.100—Form 101: *Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

F. Respondent's status

Check each that is true

(1) Respondent (your spouse) is in the military service.
If you check (1), note that there are special rules that may prevent your case from going forward if your spouse is in the military. You should talk to an attorney.

(2) Respondent is in prison or jail at _____ in _____.
Name of facility State

G. Protective or no contact order

Check one

(1) There is neither a "protective order" nor a "no contact order" between Petitioner (you) and Respondent (your spouse).

(2) There is a "protective order" or a "no contact order" between Petitioner and Respondent.
If you check (2), fill in the following information:

a. County and state where the order came from: _____
County State

b. Court case number: _____

H. Other information: _____

3. Petitioner's Request

A. Petitioner asks the court to:

Check all that apply. The court will only consider items that are checked.

(1) End the marriage of Petitioner (you) and Respondent (your spouse).

(2) Fairly divide the property and the debts of the parties.

(3) Order that Respondent pay the court fees.

(4) Order that Respondent pay for Petitioner's attorney's fees before the divorce is final.
If you check (4), you must file form 122.

(5) Order that Respondent pay spousal support (alimony) to Petitioner.
If you check (5), you must file form 122.

(6) Change Petitioner's last name to: _____
Name can only be changed to name on birth certificate or name used immediately prior to the marriage.

Print your former or birth name

(7) Other request: _____

Rule 17.100—Form 101: *Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

4. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
 B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

5. Service Instructions

If Petitioner is filing in paper

Check one

- A. Petitioner will accept service of documents at the attorney's address listed above; or
 B. Petitioner will accept service of documents in this case at the mailing address below.

6. Oath and Signature

I, _____, have read this Petition, and I certify under penalty
Print your name

of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Petition is true and correct.

_____, 20_____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address, if applicable*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Important Notice to Petitioner
 See next page for instructions for filing a Petition.

Do not file these instructions

Instructions for Filing a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically unless you get permission from the court to file in paper.** Contact the clerk of court in your county if you are unable to file electronically.

Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide [How to Register Pro Se \(Self Represented\) for eFiling](#).
- After you have registered, [log in to the electronic filing system](#) to electronically file your dissolution case.
- For help electronically filing your divorce, see [How to eFile a New Case](#).
- With your Petition, you must also file an Original Notice (104) and a Protected Information Disclosure Form (111).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your filing. For help, see [How to Resubmit a Returned Filing](#).
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please see [My Filings Reference Guide](#).

Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless you have received permission from the court to file in paper.
- With your Petition (101), you must also file a Petition Cover Sheet (102), an Original Notice (104a), and a Confidential Information Form (103).
- Forms 101 and 104a: Make **two** photocopies if you can deliver copies of these forms to your spouse in-person or by mail. Make **three** photocopies if you are going to ask the county sheriff or a civil process server to deliver these forms to your spouse.
Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.
- Forms 102 and 103: You do **not** have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county. Tell the clerk at the counter you are filing a Petition for a divorce.
- Give the clerk at the counter these forms:

Instructions for Rule 17.100—Form 101: *Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

- 101 Petition for Dissolution of Marriage (Divorce) with no Minor Children
- 102 Coversheet for a Petition for Dissolution of Marriage with no Minor Children
- 103 Confidential Information Form (*Do not make copies of this form.*)
- 104a Original Notice

- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 109.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (104a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.100—Form 103: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

Iowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*
The spouse who files the Petition for Dissolution of Marriage

and concerning

Respondent *Full name: first, middle, last*
The other spouse

Equity case no. _____

Confidential Information Form

1. Petitioner's information

_____/_____/_____
Full name: First, Middle, Last *Birth date* *Social Security number*

2. Respondent's Information

_____/_____/_____
Full name: First, Middle, Last *Birth date* *Social Security number*

3. Signature of Provider of Information

Information provided by: _____
Print your full name: first, middle, last

_____, 20____
Your signature *Month* *Day* *Year*

Important Notice:
Do not give copies of this form to anyone except the clerk of court.

Rule 17.100—Form 104: Original Notice for Personal Service

Petitioner must serve the Petition on Respondent within 90 days after filing the Petition. Failure to meet this deadline may result in the court dismissing the divorce case.

Read the [Guide to Representing Yourself in an Iowa Divorce Case](#) on the Iowa Judicial Branch website for additional important instructions.

 *If filing electronically, Petitioner must complete this form.*

 *If filing in paper, Petitioner must use form 104a.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Petition is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Original Notice for Personal Service

To Respondent Named Above

- Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent.
- A copy of the Petition for Dissolution of Marriage is attached to this Notice.
- Petitioner asks for a divorce.

Petitioner's contact information during the divorce case: _____
Petitioner's name

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address*

Important instructions for Respondent on next page

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) _____ Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.** Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.100—Form 104: *Original Notice for Personal Service*, continued

Instructions to Respondent

- A. You **must** file an Answer or a Motion with the clerk of court in the above county within **20 days** after you receive this Original Notice. If you do not file an Answer or Motion within **20 days** after receiving this Original Notice, the **court may enter a judgment against you** giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at <http://www.iowacourts.gov/> and click on “Court Rules & Forms” or on “For the Public.”
- C. If you received Petition form **101**, you may use Answer form **115**.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at <https://www.iowacourts.state.ia.us/Efile> and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper. Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner’s attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent

You should talk to an attorney at once to protect your interests.

Rule 17.100—Form 105: *Acceptance of Service*

Petitioner must complete this section:

In the Iowa District Court for _____ County <i>County where Petition is filed</i>	
Upon the Petition of Petitioner <i>Full name: first, middle, last</i> and concerning Respondent <i>Full name: first, middle, last</i>	Equity case no. _____ <p style="text-align: center;">Acceptance of Service</p>
<i>Petitioner must file this form with the clerk of court soon after Respondent signs it.</i>	

Respondent must complete this section:

<p>Respondent's Acceptance of Service, Oath, and Signature</p> <p><i>If Respondent completes this Acceptance of Service, Respondent must return this form to Petitioner soon after signing it. Petitioner will file it with the clerk of court.</i></p> <p>I, _____, am Respondent in this case. I received a copy <i>Print your name</i></p> <p>of the Original Notice and the Petition for this case. I have read this Acceptance of Service. I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Acceptance of Service is true and correct.</p> <p>_____, 20____ <i>Signed: Month Day Year Respondent's signature</i></p> <p>_____ <i>Respondent's mailing address City State ZIP code</i></p> <p>(_____) _____ <i>Phone number Email address</i></p>			
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Important Notice to Respondent

By signing this form, you are not agreeing to what Petitioner wants.
 You are only agreeing that you received a copy of the Original Notice and Petition.

Rule 17.100—Form 106: *Directions for Service of Original Notice*

Petitioner must complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

Do not use this form if Respondent has already received the Petition and Original Notice.

Do not file this form with the clerk of court in paper or electronically.

Give this form to the sheriff or other process server with your Petition (101) and Original Notice (104 if electronically filing or 104a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

_____ County where Petition is filed _____ Equity case number

1. Name and Location of Sheriff or Other Process Server

Check one and fill in the blanks

A. **Sheriff** *In county where Respondent will be served*

_____ County

_____ Street address _____ City _____ State _____ ZIP code

B. **Other process server**

_____ Name of other person serving the Notice

_____ Street address _____ City _____ State _____ ZIP code

2. Person to be Served

_____ Your spouse's name _____ Phone number

_____ Address where your spouse can be served _____ City _____ State _____ ZIP code

3. Person Requesting Service

_____ Your name _____ Phone number

_____ Your present mailing address _____ City _____ State _____ ZIP code

4. Special Instructions for Service *Provide information that will help the sheriff or process server.*

Continued on next page

Rule 17.100—Form 106: *Directions for Service of Original Notice*, continued

5. Costs of Service

Check one

A. Petitioner will pay the costs of the Sheriff or other process server.
If you cannot afford the costs, file form 109.

B. Costs for Sheriff deferred by court order: _____
Clerk of court: Sign only if costs deferred by court order

6. Notification

After completion of service, the sheriff or other process server will notify the person requesting service.

_____, 20____
Date signed: Month Day Year Your signature

Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition.
- Ask if the newspaper will publish your Original Notice by Publication (108) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where you filed the Petition

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Motion and Affidavit to Serve by Publication

1. Information and Requests

A. Respondent's residence

Check each that applies

- (1) Respondent lives outside of Iowa.
- (2) Respondent's residence and place of employment are unknown.

B. Respondent's last known residence:

Street address _____
City _____
State _____
ZIP code

County _____
Phone number _____
Email address

C. Most recent date Respondent is known to have been at the address above:

_____, 20____
Month *Day* *Year*

Rule 17.100—Form 107: *Motion and Affidavit to Serve by Publication*, continued

D. Petitioner has taken these steps to find Respondent: _____

E. Petitioner will publish notice in this newspaper: _____
Name of newspaper

F. Petitioner asks the court to allow Petitioner to serve Respondent by publication because Respondent cannot be personally served.

Continued on next page

Rule 17.100—Form 107: *Motion and Affidavit to Serve by Publication*, continued

2. Attorney Help

Check one

A. An attorney did not help me prepare or fill in this paper.

B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Oath and Signature

I, _____, have read this Motion and Affidavit, and I certify
Print your name

under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Motion and Affidavit is true and correct.

_____, 20_____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address, if applicable*

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.100—Form 108: Original Notice by Publication

Petitioner should complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

In the Iowa District Court for _____ County

County where Petition is filed

Upon the Petition of

Equity case no. _____

Original Notice by Publication

Petitioner *Full name: first, middle, last*
and concerning

Respondent *Full name: first, middle, last*

1. Information for Respondent Named Above

- Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent.
- Petitioner's contact information during the divorce case:

Petitioner's first name Middle name Last name

Petitioner's present street address City State ZIP code

County () Phone number Email address

2. Respondent's deadline for filing a Response

You must file an Answer or a Motion with the clerk of court in the above county within **20 days** after

_____, 20____.
Month Day Year

3. Instructions to Respondent Named Above

You must file an Answer or a Motion with the clerk of court in the above county within 20 days after the date provided above. If you do not respond, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition.

Important Notice to Respondent

- You should talk to an attorney at once to protect your interests.
- If you choose not to have an attorney represent you in this matter, go to the Iowa Judicial Branch website for [self-represented litigant information](#) and [family law forms](#).

If you need assistance to participate in court due to a disability, contact the disability coordinator at: () _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.** Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.100—Form 108: *Original Notice by Publication*, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under “eFiling,” or call the clerk of court office in your county.

- You must register to eFile through the Iowa Judicial Branch website at <https://www.iowacourts.state.ia.us/Efile/> and obtain a log in and password to file and view documents in your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs

Petitioner uses this form only if Petitioner cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff **cannot be waived**. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

**Application and Affidavit to
Defer Payment of Costs**

1. Request

A. I am Petitioner.

B. For my Application and Affidavit, I state that:

Check all that apply

- (1) I am unable to pay the filing fee or service costs or other court costs.
- (2) I ask the court for permission to proceed without prepayment of costs and fees.
- (3) I am filing this Application and Affidavit in good faith.
- (4) I believe I am entitled to what I am asking for in this case.

C. Household

There are _____ people living in my household.
Number

D. My household income is \$ _____ per month.

Put the total amount of all income and benefits before deductions for all members of your household.

E. My income comes from:

List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIP.

Rule 17.100—Form 109: *Application and Affidavit to Defer Payment of Costs*, continued

F. My household has the following monthly expenses:

- (1) Rent or mortgage \$ _____
- (2) Utilities \$ _____
- (3) Phone \$ _____
- (4) Food \$ _____
- (5) Transportation \$ _____

G. I have \$ _____ in cash, checking, and savings.

Continued on next page

Rule 17.100—Form 109: *Application and Affidavit to Defer Payment of Costs*, continued**2. Attorney Help***Check one*

- A. An attorney did not help me prepare or fill in this paper.
 B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Certification of Service by Mailing or Delivery*Section 3 to be completed only if filing in paper or if the other party is exempt from electronic filing.**This document, if filed electronically, will automatically be served on registered parties.*

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Application and Affidavit to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

4. Oath and Signature

I, _____, have read this Application and Affidavit, and I certify under
Print your name

penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Application and Affidavit is true and correct.

_____, 20____
Signed on: Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address – if available*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.100—Form 110: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

This form is used only if someone other than Petitioner (you), a sheriff, or a process server delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Petition is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

1. Affidavit

I, _____, delivered a copy of the Original Notice and
Name of person – Cannot be Petitioner, sheriff, or process server
Petition for Dissolution of Marriage for this case to:

_____ on _____, 20____ at _____
Name of Respondent Month Day Year Time

Check one
 a.m.
 p.m.

by handing Respondent copies of the attached papers.

2. Oath and Signature

To be completed by the person who gave the Petition and Original Notice to Respondent.

I, _____, have read this Affidavit of Service, and I certify
Print your name

under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Affidavit of Service is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address – if available

* *If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.100—Form 111: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see division VI of Chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

If filing electronically:

- **Petitioner** must complete this form (111) and file it with the Petition (101) and Original Notice (104).
- **Respondent** must complete this form if adding or correcting protected information.

Paper filers also may use form 111 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where the case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Protected Information Disclosure

For electronic filers:

When protected information, as defined in Iowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer’s responsibility and the procedures to use for protecting personal information, refer to Iowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner *The spouse who filed for divorce.*

Provide the complete version of protected information and the redacted version included in documents you file.

A. Name _____
First Middle Last

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Social security number	- - XXX-XX-XXXX	Last four digits only
(2) Financial account numbers	Full account number	Partial account number only
(3) Date of birth	/ / mm/dd/yyyy	Year only
(4) Individual taxpayer identification numbers	- - XXX-XX-XXXX	Last four digits only

Rule 17.100—Form 111: *Protected Information Disclosure*, continued

(5) Personal identification numbers	Full number	Partial only
(6) Other unique identifying numbers	Full number	Partial only
(7) Additional protected information	Full information	Partial information
(8) Additional protected information	Full information	Partial information
(9) Additional protected information	Full information	Partial information
(10) Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

2. Respondent *The spouse who did not file for divorce.*

Provide the complete version of protected information and the redacted version included in documents you file.

A. Name _____
First Middle Last

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Social security number	- - XXX-XX-XXXX	Last four digits only
(2) Financial account numbers	Full account number	Partial account number only
(3) Date of birth	/ / mm/dd/yyyy	Year only
(4) Individual taxpayer identification numbers	- - XXX-XX-XXXX	Last four digits only
(5) Personal identification numbers	Full number	Partial only
(6) Other unique identifying numbers	Full number	Partial only
(7) Additional protected information	Full information	Partial information
(8) Additional protected information	Full information	Partial information
(9) Additional protected information	Full information	Partial information
(10) Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Rule 17.100—Form 111: *Protected Information Disclosure*, continued

3. Information provided by:

	/s/	
<i>Handwritten signature of party completing this form or attorney if filing in paper</i>		<i>Electronic signature of party completing this form or attorney if filing electronically</i>

Law firm, if applicable

<i>Mailing address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>

()
Phone number

<i>Email address</i>	<i>Additional email address, if applicable</i>

		20	
<i>Month</i>	<i>Day</i>	<i>Year</i>	
<i>Date information provided</i>			

Rule 17.100—Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Respondent must file an Answer within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

Use this Answer form 115 if you received Petition form 101, otherwise use form 116.

Read the [Guide to Representing Yourself in an Iowa Divorce Case](#) on the Iowa Judicial Branch website before using this form.

 *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).*

 *If filing in paper, you may use form 111.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your spouse filed the Petition

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Your spouse's full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Your full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p>Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children</p>
---	---

1. Personal Information *Fill in all information that you know.*

A. Petitioner's information

Check one

If paragraph 1A of the Petition (form 101) is not correct, check (2) and fill in the blanks.

(1) Petitioner's (your spouse's) birth year and present residence are correct in the Petition.

(2) Petitioner's birth year and present residence are not correct in the Petition.

The correct information is: _____
Birth year

_____ *Present street address* _____ *City* _____ *State* _____ *ZIP code*

_____ *County* (_____) _____ *Phone number* _____ *Email address*

B. Respondent's information

Check one

If paragraph 1B of the Petition (form 101) is not correct, check (2) and fill in the blanks.

(1) Respondent's (your) birth year and present residence are correct in the Petition.

(2) Respondent's birth year and present residence are not correct in the Petition.

The correct information is: _____
Birth year

Rule 17.100—Form 115: *Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

Present street address *City* *State* *ZIP code*

County (_____) *Phone number* *Email address*

2. General Information About the Marriage and the Parties

A. Date and location of the marriage

Check one

If paragraph 2A of the Petition (form 101) is not correct, check (2) and fill in the blanks.

- (1) The date and location of the marriage are correct in the Petition.
 (2) The date and location of the marriage are not correct in the Petition.

The correct information is:

_____, _____, _____, _____, _____
Month *Day* *Year* *City* *State*

B. Children

Check all that are true

If you do not check one or more of these boxes, explain in 2I.

- (1) There are no children under the age of 18 who are children of both Petitioner and Respondent.
 (2) There are no children under the age of 18 who were adopted or born during this marriage.
 (3) There are no children 18 years of age or older who still need support.
 (4) Neither Petitioner nor Respondent is pregnant.

C. Petitioner's residence

- (1) The **only** reason that Petitioner (your spouse) is living in Iowa is just to get a divorce.

True

False *If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False."*

- (2) *If you disagree with paragraph 2C(2) of the Petition (form 101), fill in the blanks.*

Petitioner has lived in Iowa for the last _____ years and _____ months

In _____ county.

Continued on next page

Rule 17.100—Form 115: *Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

D. Parties' residence

Check each that is true

- (1) Respondent (you are Respondent) is a resident of Iowa.
- (2) Petitioner (your spouse) has lived in Iowa for more than one year.
If you did not check (1) or (2), you should talk to an attorney.

E. Condition of the marriage

Check all that are true

- (1) The marriage is broken and cannot be saved.
- (2) This is the only divorce case going on in involving this marriage.
If you did not check (2), explain in 2I. You should also talk to an attorney.
- (3) Petitioner did not file the Petition in good faith for the purpose of ending the marriage.
- (4) Counseling will not save the marriage. *If counseling may save the marriage, do not check (4).*

F. Respondent's status

Check each that is true

- (1) Respondent (you are Respondent) is in the military service.
If you check (1), note that there are special rules that may prevent this dissolution from going forward if you are in the military. You should talk to an attorney.
- (2) Respondent is in prison or jail at _____ in _____.
Name of facility State
If you are in prison or jail, you may be entitled to a "guardian ad litem," a person, usually an attorney, appointed to protect the interests of a spouse in some cases.

G. Protective or no contact orders

Check one

- (1) There is neither a "protective order" nor a "no contact order" between Respondent (you) and Petitioner (your spouse).
- (2) There is a "protective order" or "no contact order" between Respondent and Petitioner.
If you check (2), fill in the following information:
 - a. County and state where the order came from: _____
County State
 - b. Court case number: _____

H. Respondent denies anything in the Petition that Respondent has not agreed is correct.

I. Other information: _____

Continued on next page

Rule 17.100—Form 115: *Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

3. Respondent's Request

A. Respondent asks the court to:

Check all that apply. The court will only consider items that are checked.

If you do not know what you want, talk to an attorney.

- (1) End the marriage of Respondent (you) and Petitioner (your spouse).
- (2) Fairly divide the property and the debts of the parties.
- (3) Order that Petitioner pay the court fees.
- (4) Order that Petitioner pay for Respondent's attorney's fees before the divorce is final
If you check (4), you must file form 122.
- (5) Order that Petitioner pay spousal support (alimony) to Respondent.
If you check (5), you must file form 122.
- (6) Change Respondent's last name to: *Name can only be changed to name on birth certificate or name used immediately prior to the marriage.*
_____ *Print your former or birth name*

B. Other request: _____

Continued on next page

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically** unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide [How to Register Pro Se \(Self Represented\) for eFiling](#) on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may [directly log in to EDMS](#); or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see [How to eFile to an Existing Case](#).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see [How to Resubmit a Returned Filing](#).
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Petition was filed. The county is listed at the top of the Petition (form 101).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, **or** mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

Rule 17.100—Form 116: *General Answer to a Petition*

Respondent must file an Answer within **20 days** after receiving the Petition and Original Notice, or the court may enter a judgment against Respondent giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 101, use form 115 for your Answer.

Read the [Guide to Representing Yourself in an Iowa Divorce Case](#) on the Iowa Judicial Branch website before using this form.

 *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).*

 *If filing in paper, you may use form 111 to provide any protected information in full.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Petition is filed

Upon the Petition of

Petitioner *Your spouse's full name: first, middle, last*

and concerning

Respondent *Your full name: first, middle, last*

Equity case no. _____

General Answer to a Petition

1. Respondent's Answer *You are Respondent.*

A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

B. Respondent denies that the following paragraphs in the Petition are true:

C. Respondent does not know whether the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know how something, such as a date, place, or when something happened.

Continued on next page

Rule 17.100—Form 116: *General Answer to a Petition*, continued

D. Protective or no contact orders

Check one

- (1) There is neither a “protective order” nor a “no contact order” between Respondent (you) and Petitioner (your spouse).
- (2) There is a “protective order” or “no contact order” between Respondent and Petitioner.

If you check (2), fill in the following information:

a. County and state where the order came from: _____
County State

b. Court case number: _____

E. Respondent denies anything in the Petition that is not admitted in this Answer.

F. Other information: _____

2. Respondent’s Request *If you do not know what you want, talk to an attorney.*

Respondent asks the court to: *Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.*

Continued on next page

Rule 17.100—Form 116: *General Answer to a Petition*, continued

3. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

4. Service Instructions

If Respondent is filing in paper

Check one

- A. Respondent will accept service of documents at the attorney's address listed above; or
- B. Respondent will accept service of documents in this case at the mailing address below.

5. Certification of Service by Mailing or Delivery

Section 5 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Answer to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

6. Oath and Signature

I, _____, have read this Answer, and I certify under penalty
Print your name
of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Answer is true and correct.

_____, 20____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address, if applicable*

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically*

Important Instructions for filing this form on next page.

Instructions for Rule 17.100—Form 116: *General Answer to a Petition*, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically unless you get permission from the court to file in paper.** Contact the clerk of court in your county if you are unable to file electronically.

Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide [How to Register Pro Se \(Self-Represented\) for eFiling](#) on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may [directly log in to EDMS](#); or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see [How to eFile to an Existing Case](#).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see [How to Resubmit a Returned Filing](#).
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Petition was filed. The county is listed at the top of the Petition (form 101).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, **or** mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

Rule 17.100—Form 122: *Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children*

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children</p>
---	---

I am

Check one

- A. Petitioner
- B. Respondent

1. Request

A. I ask the court to

Check all that apply. If you check any box in A, you must tell the court why you are making this request in B.

- (1) Change the hearing date that has been set for _____, 20____.
Month *Day* *Year*
- (2) Order counseling (conciliation).
- (3) Set a hearing date for a divorce Decree by default.
- (4) Award me attorney's fees before the divorce is final.
- (5) Award spousal support (alimony) to me before the divorce is final.
- (6) Shorten the 90-day waiting period for getting a divorce Decree.
- (7) Other request *Explain*

B. I am making the request(s) in this Motion because: _____

Continued on next page

Rule 17.100—Form 122: Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

2. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Certification of Service by Mailing or Delivery

Section 3 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20_____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Motion to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

4. Oath and Signature

I, _____, have read this Motion, and I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Motion is true and correct.

_____, 20_____
Signed on: Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address – if available*

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.100—Form 123: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 122) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County

County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Response to a Motion</p>
--	---

I am

Check one

- A. Petitioner
- B. Respondent

1. Motion

The other party filed a Motion on _____, 20____.

Month

Day

Year

2. Response

Check A or B.

- A. I agree with the Motion.
- B. I disagree with the request(s) in the Motion to:

If you check B, check all of the following that apply. If you check any box in B, you must tell the court why you disagree with the request in C.

- (1) Change the hearing date that has been set for _____, 20____.
- Month Day Year*
- (2) Order counseling (conciliation).
- (3) Set a hearing date for a divorce Decree by default.
- (4) Award my spouse attorney's fees before the divorce is final.
- (5) Award spousal support (alimony) to my spouse before the divorce is final.
- (6) Shorten the 90-day waiting period for getting a divorce Decree.
- (7) Other request. *Explain* _____

Rule 17.100—Form 123: *Response to a Motion*, continued

C. I disagree with the Motion because: _____

Continued on next page

Rule 17.100—Form 123: *Response to a Motion*, continued

3. Attorney Help

Check one

A. An attorney did not help me prepare or fill in this paper.

B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney

Business address of attorney or organization City State ZIP code

(_____) _____ (_____) _____ _____
Attorney's phone number Attorney's fax number – optional Attorney's email address – optional

4. Certification of Service by Mailing or Delivery

Section 4 to be completed only if filing in paper or if the other party is exempt from electronic filing.

This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name Month Day Year

I mailed or gave a copy of this Response to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address City State ZIP code

5. Oath and Signature

I, _____, have read this Response, and I certify under
Print your name
 penalty of perjury and pursuant to the laws of the State of Iowa that I have read this Response and that the information I have provided in it is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____ _____
Phone number Email address Additional email address – if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*

Caution: This form may require you to provide protected or sensitive information.

Each party must complete one of these forms.

-  *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.*
-  *If filing in paper, you may use form 111 to provide any protected information in full if you have not already done so.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p>Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children</p>
--	--

I am

Check one

- A. Petitioner
- B. Respondent

I, _____, state that this is a true and complete statement
Print your name
of my assets, debts, and present income as of the ____ day of _____, 20__.
Day *Month* *Year*

1. Assets *Things you and your spouse own.*

A. Real estate

Attach additional sheets if necessary.

**Owner (Whose name is on the deed?): P = Petitioner R = Respondent J = Joint (Both)*

Type of real estate	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1) Homestead <i>Address</i>		\$	\$ to:	\$
(2) Other real estate <i>Address</i>		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

**Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)*

Vehicles <i>Make (e.g. Ford)</i> <i>Year</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net Value <i>Market value minus debt owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other vehicles.

C. Securities, stocks, & bonds

**Owner (Whose name is on the securities, stocks, or bonds?):*

P = Petitioner R = Respondent J = Joint (Both)

Securities, stocks, & bonds <i>Company name</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other securities, stocks, & bonds.

D. Life insurance

**Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)*

Life insurance <i>Company name</i>	Owner* <i>P,R,J</i>	Cash value <i>Not death benefit</i>	Loan from cash value <i>Total amount still owed on loan</i>	Cash value <i>Minus loan owed</i>
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

E. Bank accounts

**Owner (Whose name is on the checking or savings account?):
P = Petitioner R = Respondent J = Joint (Both)*

Checking & savings accounts <i>Bank or Credit Union name If you do not use bank accounts, write "Cash"</i>	Owner* <i>P,R,J</i>	Cash value	Personal loans or overdraft accounts <i>Total amount you still owe on it</i>	Net value <i>Cash value minus loan / overdraft owed</i>
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on other checking & savings accounts.

F. Household

**Owner: P = Petitioner R = Respondent J = Joint (Both)*

Household contents <i>Describe</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1) Furniture		\$	\$	\$
a.		\$	to:	\$
b.		\$	to:	\$
c.		\$	to:	\$
d.		\$	to:	\$
(2) Appliances / Electronics		\$	\$	\$
a.		\$	to:	\$
b.		\$	to:	\$
c.		\$	to:	\$
d.		\$	to:	\$
(3) Other contents		\$	\$	\$
a.		\$	to:	\$

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

b.		\$	\$ to:	\$
c.		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other household assets.

G. Retirement assets

*Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)

Retirement assets <i>Examples: Pensions, IRAs, 401(k)s, annuities, etc.</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Loan from retirement account <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus loan owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Other assets <i>Describe</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued**I. Totals**

(1) Total from attached sheets <i>Listed in 1A-H.</i>	\$
(2) Total net value of assets <i>Listed in 1A-H.</i>	\$

2. Other Debts *Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.***Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)*

Other debts <i>List only those not included as "debt" or "loans" under "Assets" in part 1.</i>	Whose debt?* <i>P,R,J</i>	Amount owed
(1)		\$
(2)		\$
(3)		\$
(4)		\$
(5)		\$
(6)		\$
(7)		\$
(8)		\$
(9)		\$
(10)		\$
(11)		\$
(12)		\$
(13)		\$
(14)		\$
(15)		\$
<input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on other debts, and enter the total.</i>		\$
Total other debts <i>Including amounts shown on attached sheet, if any.</i>		\$

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

3. Income and Deductions

A. Petitioner's Income and Deductions *If you are Respondent, give your best estimate for each amount.*

**How often is income paid or deduction taken?*

W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

Current income and deductions for Petitioner <i>Sources of income and deductions</i>	Income		Deductions	
	How often paid?* <i>W,B,M,T</i>	Gross amount <i>Before deductions</i>	How often taken?* <i>W,B,M,T</i>	Amount of deduction
(1) Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
(2) Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
(3) Unemployment assistance		\$		\$
(4) Family Investment Program		\$		\$
(5) Social Security		\$		\$
(6) Other <i>Identify:</i>		\$		\$
(7) Other <i>Identify:</i>		\$		\$
(8) Other <i>Identify:</i>		\$		\$
(9) Totals from attached sheets, if any <input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on Petitioner's income and deductions.</i>		\$		\$
Totals <i>Current income and deductions for Petitioner</i>		\$ Income total		\$ Deductions total

Continued on next page

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

B. Respondent's Income and Deductions *If you are Petitioner, give your best estimate for each amount.*

**How often is income paid or deduction taken?*

W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

Current income and deductions for Respondent <i>Sources of income and deductions</i>	Income		Deductions	
	How often paid?*	Gross amount	How often taken?*	Amount of deduction
	<i>W,B,M,T</i>	<i>Before deductions</i>	<i>W,B,M,T</i>	
(1) Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
(2) Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
(3) Unemployment assistance		\$		\$
(4) Family Investment Program		\$		\$
(5) Social Security		\$		\$
(6) Other <i>Identify:</i>		\$		\$
(7) Other <i>Identify:</i>		\$		\$
(8) Other <i>Identify:</i>		\$		\$
(9) Totals from attached sheets, if any <input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on Respondent's income and deductions.</i>		\$		\$
Totals <i>Current income and deductions for Respondent</i>		\$ Income total		\$ Deductions total

4. Expenses

A. Living arrangements

Check one

- (1) My spouse and I live in the same home.
- (2) My spouse and I do not live in the same home.

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

B. My expenses

Note: You must complete this section if you or your spouse wants spousal support (alimony).

**How often paid?: W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month A = Annually*

Type of expense	Paid to	How often paid?*	Monthly payment
(1) House payment or rent			\$
(2) Food <i>At home & restaurants</i>			\$
(3) Transportation (<i>gas, bus fare</i>) <i>Not car loan payments – see (12).</i>			\$
(4) Clothing			\$
(5) Medical, dental <i>Not health insurance payments – see 4B(10).</i>			\$
(6) Utilities (<i>gas, electric</i>)			\$
(7) Phone			\$
(8) Cable / satellite television / internet			\$
(9) Car insurance payment			\$
(10) Health insurance payment			\$
(11) Credit card payments			\$
(12) Car loan payments			\$
(13) Other loan payments			\$
(14) Other expense <i>Identify:</i>			\$
(15) Other expense <i>Identify:</i>			\$
(16) Other expense <i>Identify:</i>			\$
(17) Totals from attached sheets, if any <input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on your expenses.</i>			\$
	Total expenses		

Rule 17.100—Form 124: *Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued**5. Attorney Help***Check one*A. An attorney did not help me prepare or fill in this paper.B. An attorney helped me prepare or fill in this paper.*If you check B, you must fill in the following information:*_____
*Name of attorney or organization, if any*_____
*Attorney's P.I.N. # – Ask the attorney*_____
*Business address of attorney or organization*_____
*City*_____
*State*_____
ZIP code(_____) _____
Attorney's phone number(_____) _____
*Attorney's fax number – optional*_____
*Attorney's email address – optional***6. Certification of Service by Mailing or Delivery***Section 6 to be completed only if filing in paper or if the other party is exempt from electronic filing.**This document, if filed electronically, will automatically be served on registered parties.*I, _____, certify that on _____, _____, 20_____
Print your name Month Day Year

I mailed or gave a copy of this Financial Affidavit to the other party or the other party's attorney at this address:

*Name of person to whom I delivered or mailed it*_____
*Party's or attorney's mailing address*_____
*City*_____
*State*_____
*ZIP code***7. Oath and Signature**I, _____, have read this Financial Affidavit, and I certify
Print your name

under penalty of perjury and pursuant to the laws of the State of Iowa that I have read this Financial Affidavit and that the information I have provided in it is true and correct.

_____, 20_____
*Signed on: Month Day Year Your signature**_____
*Mailing address*_____
*City*_____
*State*_____
ZIP code(_____) _____
*Phone number*_____
*Email address*_____
*Additional email address – if available*** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.100—Form 125: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Affidavit of Mailing Notice

1. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

Important Notice to Petitioner

Petitioner **must** file this if he or she served Notice by Publication in a newspaper and asks the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

Petitioner's Oath and Signature on next page

Rule 17.100—Form 125: *Affidavit of Mailing Notice*, continued**2. Petitioner's Oath and Signature**

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that on the _____ day of _____, 20____, I sent by ordinary
Day Month Year
 mail with proper postage, the following paper or papers:

Check one

- Original Notice and Petition for Dissolution of Marriage, or
 Notice of Intent to File a Written Application for Default Decree

to Respondent's last-known address as follows:

Respondent's street address City State ZIP code

_____, 20____
*Signed on: Month Day Year Petitioner's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address – if available

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.100—Form 126: *Notice of Intent to File Written Application for Default Decree*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County

County where your case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Notice of Intent to File Written Application for Default Decree

To: _____
Respondent's first name Middle name Last name

Date of Notice: _____, 20____
Month Day Year

Important Notice to Respondent:

You are in default because you have failed to take action required of you in this case. Unless you act within **10 days** from the date of this Notice, a Default Decree of Dissolution of Marriage will be entered against you without a hearing, and you may lose your property or other important rights.

You should seek legal advice at once.

Handwritten signature of Petitioner or attorney if filing in paper or /s/ _____
Electronic signature of Petitioner or Attorney if filing electronically

The person who provided the signature above must fill in the information below.

Present street address (If attorney, firm address) City State ZIP code

(_____) _____
Phone number Email address

Instructions for Petitioner

 **Filing your Notice electronically**

EDMS will automatically serve Respondent unless Respondent is exempt from electronic filing requirements.

 **Filing your Notice in paper** (if you have received permission from the court to file in paper)

1. Deliver a copy of this form to Respondent by mail or in person.
2. Complete form 125 and file the original at the clerk of court's office.
3. File the original of this form (126) at the clerk of court's office.
4. Keep a copy for your records.

Rule 17.100—Form 127: Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or sensitive information.

Use this form only if you have filed a Petition for Dissolution of Marriage (101) and:

- Your spouse (Respondent) did not file an Answer, or
 - Your spouse will not work with you to prepare a Settlement Agreement (128).
-  *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.*
-  *If filing in paper, you may use form 111 to provide any protected information in full if you have not already done so.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p>Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children</p>
--	--

1. Personal Information *Fill in all information that you know. If you have been assaulted by your spouse and you fear for your safety, you may leave your address, phone number, and email blank.*

I am

Check one

- A. Petitioner
- B. Respondent

(1) Petitioner's birth year and present residence: _____
Birth year

Petitioner's present street address

County

City

(_____) _____
Phone number

State

ZIP code

Email address

(2) Respondent's birth year and present residence: _____
Birth year

Respondent's present street address

County

City

(_____) _____
Phone number

State

ZIP code

Email address

Rule 17.100—Form 127: *Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

2. Request for Relief

A. Children *Check all that are true*

- (1) There are no children under the age of 18 who are children of both Petitioner and Respondent.
- (2) There are no children under the age of 18 who were adopted or born during this marriage.
- (3) There are no children 18 years of age or older who still need support.
- (4) Neither Petitioner nor Respondent is pregnant.

B. Breakdown of marriage

The marriage is broken down and cannot be saved.

C. Counseling

Counseling will not save the marriage.

D. Waiting period before decree *Check one*

- (1) More than 90 days have passed since Respondent was served with an Original Notice.
- (2) Fewer than 90 days have passed since Respondent was served with an Original Notice, but I want the court to take action right away without a separate hearing. There are no children affected by this action. Neither Petitioner nor Respondent is pregnant. This paper explains how I would like to settle all issues in my divorce.

E. Financial affidavits *Check one*

- (1) I filed a Financial Affidavit (124). I certify that I have fully disclosed all income and the identity and value of all assets and debts.
- (2) I am asking that the court not require me to file a Financial Affidavit. *Explain*

F. Division of personal property *Check one*

- (1) All of the personal property obtained during the marriage has been divided. I ask that Petitioner will keep the personal property in Petitioner's possession, and Respondent will keep the personal property in Respondent's possession. *If you check (1), skip to G.*
- (2) I ask that our personal property be divided as follows: *Attach additional sheets if necessary.*
 - a. Petitioner will get the following as Petitioner's separate personal property:

- b. Respondent will get the following as Respondent's separate personal property:

Rule 17.100—Form 127: *Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

G. Division of real estate

For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel.

(1) Ownership of real estate

Check one

- a. We do not own any real estate. *If you check a, skip to H.*
- b. We own real estate located at: _____,
Street address
in the City of _____, County of _____, and
State of _____. This land is described in the deed as follows:

(2) The real estate shall be:

Check one

- a. Sold and the profit or debt divided _____% to Petitioner and _____% to Respondent.
- b. Awarded to Petitioner, subject to all liens and mortgages.
- c. Awarded to Respondent, subject to all liens and mortgages.
- d. Other *Explain* _____

(3) Additional real estate

Check this box if you are attaching separate sheets for additional parcels of real estate.

H. Division of debts

Check one

- (1) There are no debts.
- (2) I have listed all the debts I know about and ask that they be divided as follows:
Attach additional sheets if necessary.
 - a. Petitioner will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any <i>Last 4 numbers only</i>	iii. Total amount still owed
(a)		\$
(b)		\$

Rule 17.100—Form 127: *Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.

b. Respondent will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.

c. For any debt we do not know about, the spouse who made the debt will pay that debt.

I. Cash payment

I ask that

Check one

- (1) Neither Petitioner nor Respondent pay any money to the other.
- (2) Petitioner pay Respondent \$ _____ to equalize the division of property and debts by _____, 20____.

Month
 Day
 Year
- (3) Respondent pay Petitioner \$ _____ to equalize the division of property and debts by _____, 20____.

Month
 Day
 Year

J. Spousal support (alimony)

Check one

I ask that:

- (1) Neither Petitioner nor Respondent pay spousal support (alimony) to the other.
- (2) Spousal support (alimony) be paid as follows: _____

Rule 17.100—Form 127: *Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

K. Name change

Check one

I ask that my last name

(1) Not be changed.

(2) Be changed to: _____ *Name can only be changed to name on birth certificate or name used immediately prior to the marriage.*
Print your former or birth name

L. Court fees

Check one

I ask that

(1) Petitioner will pay all court fees.

(2) Respondent will pay all court fees.

(3) Petitioner and Respondent shall each pay one-half of the remaining court fees.

(4) Petitioner and Respondent shall each pay one-half of the total court fees.

M. Attorney's fees

Check one

(1) I have no attorney's fees.

(2) I will pay my own attorney's fees.

(3) I ask that my spouse pay me \$ _____ for attorney's fees.

N. Necessary documents

I ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Decree.

O. Other request for relief *Attach additional sheets if necessary.* _____

3. Statements of understanding and fact

Check all that apply

A. I have made a full disclosure of my property and debts to the court.

B. This request for relief addresses all issues in my divorce.

C. I want the court to approve this request for relief and make it part of the final Decree.

Continued on next page

Rule 17.100—Form 127: *Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

4. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

5. Certification of Service by Mailing or Delivery

Section 5 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Request to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

6. Oath and Signature

I, _____, have read this Request, and I certify under penalty
Print your name

of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Request is true and correct.

_____, 20____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address, if applicable*

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.100—Form 128 *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*

Caution: *This form may require you to provide protected or confidential information.*

Use this form only if you and your spouse both agree to the terms of a settlement agreement.

-  *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.*
-  *If filing in paper, you may use form 111 to provide any protected information in full.*

Do not use this form if:

- *You and your spouse have children under the age of 18, or*
- *You and your spouse have children 18 years of age or older who still need support.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children</p>
--	---

1. Personal Information *Fill in all information that you know. If you have been assaulted by your spouse and you fear for your safety, you may leave your address, phone number, and email blank.*

A. Petitioner's birth year and present residence: _____
Birth year

Petitioner's present street address *City* *State* *ZIP code*

County *() Phone number* *Email address*

B. Respondent's birth year and present residence: _____
Birth year

Respondent's present street address *City* *State* *ZIP code*

County *() Phone number* *Email address*

Rule 17.100—Form 128: *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

2. Agreements

We agree to the following:

A. Children *Check all that are true*

- (1) There are no children under the age of 18 who are children of both Petitioner and Respondent.
- (2) There are no children under the age of 18 who were adopted or born during this marriage.
- (3) There are no children 18 years of age or older who still need support.
- (4) Neither Petitioner nor Respondent is pregnant.

B. Breakdown of marriage

The marriage is broken down and cannot be saved.

C. Counseling

Counseling will not save the marriage.

D. Waiting period before decree *Check one*

- (1) More than 90 days have passed since Respondent was served with an Original Notice.
- (2) Fewer than 90 days have passed since Respondent was served with an Original Notice, but we want the court to take action right away without a separate hearing. We have no children affected by this action. Neither Petitioner nor Respondent is pregnant. This paper explains how we would like to settle all issues in our divorce.

E. Financial affidavits *Check one*

- (1) Petitioner or Respondent has filed a Financial Affidavit (124).
If you check (1), check a and/or b.
 - a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts.
 - b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent has fully disclosed all income and the identity and value of all assets and debts.
- (2) We are asking that the court not require us to file Financial Affidavits because: *Explain*

F. Division of personal property

Check one

- (1) We have divided our personal property. Petitioner will keep the personal property in Petitioner's possession. Respondent will keep the personal property in Respondent's possession.
If you check (1), skip to G.
- (2) Our personal property will be divided as follows:
Attach additional sheets if necessary.

- a. Petitioner will get the following as Petitioner's separate personal property:

Rule 17.100—Form 128: *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

b. Respondent will get the following as Respondent's separate personal property:

G. Division of real estate

*For each parcel of real estate you own, provide the following information.
Attach a separate sheet for each additional parcel.*

(1) Ownership of real estate

Check one

a. We do not own any real estate. *If you check a, skip to H.*

b. We own real estate located at: _____,
Street address

in the City of _____, County of _____, and

State of _____. This land is described in the deed as follows:

(2) The real estate shall be:

Check one

a. Sold and the profit or debt divided _____% to Petitioner and _____%
to Respondent.

b. Awarded to Petitioner, subject to all liens and mortgages.

c. Awarded to Respondent, subject to all liens and mortgages.

d. Other *Explain* _____

(3) Additional real estate

Check this box if you are attaching separate sheets for additional parcels of real estate.

H. Division of debts

Check one

(1) There are no debts.

(2) We have listed all the debts that we know about and ask that they be divided as follows:
Attach additional sheets if necessary.

Continued on next page

Rule 17.100—Form 128: *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

a. Petitioner will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any <i>Last 4 numbers only</i>	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.

b. Respondent will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any <i>Last 4 numbers only</i>	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.

c. For any debt we do not know about, the spouse who made the debt will pay that debt.

I. Cash payment

We ask that

Check one

- (1) Neither Petitioner nor Respondent pay any money to the other.
- (2) Petitioner pay Respondent \$ _____ to equalize the division of property and debts by _____, 20____.
Month Day Year
- (3) Respondent pay Petitioner \$ _____ to equalize the division of property and debts by _____, 20____.
Month Day Year

Continued on next page

Rule 17.100—Form 128: *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

J. Spousal support (alimony)

Check one

We ask that:

- (1) Neither Petitioner nor Respondent pay spousal support (alimony) to the other.
- (2) Petitioner pay spousal support (alimony) to Respondent as follows: _____

- (3) Respondent pay spousal support (alimony) to Petitioner as follows: _____

K. Name change

Check one

We ask that

(1) Petitioner's name

- a. Not be changed.
- b. Be changed to:

_____ *Print Petitioner's former or birth name*

Name can only be changed to name on birth certificate or name used immediately prior to the marriage.

(2) Respondent's name

- a. Not be changed.
- b. Be changed to:

_____ *Print Respondent's former or birth name*

Name can only be changed to name on birth certificate or name used immediately prior to the marriage.

L. Court fees

Check one

We ask that

- (1) Petitioner will pay all court fees.
- (2) Respondent will pay all court fees.
- (3) Petitioner and Respondent shall each pay one-half of the remaining court fees.
- (4) Petitioner and Respondent shall each pay one-half of the total court fees.

Continued on next page

Rule 17.100—Form 128: *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

M. Attorney's fees

(1) Petitioner's attorney's fees

Check one

- a. Petitioner has no attorney's fees.
- b. Petitioner will pay Petitioner's attorney's fees.
- c. Respondent will pay \$ _____ for Petitioner's attorney's fees.

(2) Respondent's attorney's fees

Check one

- a. Respondent has no attorney's fees.
- b. Respondent will pay Respondent's attorney's fees.
- c. Petitioner will pay \$ _____ for Respondent's attorney's fees.

N. Necessary documents

We will sign and promptly deliver to each other any papers that may be needed to carry out this Settlement Agreement.

O. Other agreements

Attach additional sheets if necessary.

Continued on next page

Rule 17.100—Form 128: *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

3. Attorney Help

Check one

A. Petitioner

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.

If you check (2), you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

B. Respondent

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.

If you check (2), you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

4. Oaths and Signatures

This Settlement Agreement addresses all issues in our divorce. We have made a full disclosure of our property and debts to each other. We want the court to approve this agreement and make it a part of the final Decree.

A. Petitioner's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court.

_____, 20_____
Month *Day* *Year* *Petitioner's signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address – if available*

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Continued on next page

Rule 17.100—Form 128: *Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children*, continued

B. Respondent's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court.

_____, 20_____
*Month Day Year Respondent's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address - if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rules 17.101 to 17.199 Reserved.

Rule 17.200 Family law forms for dissolution of marriage with dependent children. The following forms are for use in dissolution of marriage (divorce) actions with children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and are dependent or still need support. These forms must also be used if a spouse of the marriage is pregnant.

Form 201:	Petition for Dissolution of Marriage with Children
Form 202:	Petition Cover Sheet for a Dissolution of Marriage with Children
Form 203:	Confidential Information Form
Form 204:	Original Notice for Personal Service
Form 204a:	Original Notice for Personal Service
Form 205:	Acceptance of Service
Form 206:	Directions for Service of Original Notice
Form 207:	Motion and Affidavit to Serve by Publication
Form 208:	Original Notice by Publication
Form 209:	Application and Affidavit to Defer Payment of Costs
Form 210:	Affidavit of Service of Original Notice and Petition for Dissolution of Marriage
Form 211:	Protected Information Disclosure
Form 212:	Joint Statement on Legal Parent
Form 213:	Motion to Disestablish Legal Parent
Form 214:	Reserved
Form 215:	Answer to Petition for Dissolution of Marriage with Children
Form 216:	General Answer to a Petition for Dissolution of Marriage with Children
Forms 217 to 220:	Reserved
Form 221:	Affidavit for Temporary Custody and Visitation
Form 222:	Motion in a Dissolution of Marriage with Children
Form 223:	Response to a Motion
Form 224:	Financial Affidavit for a Dissolution of Marriage with Children
Form 225:	Affidavit of Mailing Notice
Form 226:	Notice of Intent to File Written Application for Default Decree
Form 227:	Request for Relief in a Dissolution of Marriage with Children
Form 228:	Settlement Agreement for a Dissolution of Marriage with Children
Form 229:	Agreed Parenting Plan
Form 230:	Proposed Parenting Plan
Forms 231 to 300:	Reserved

[Court Order December 19, 2013; March 26, 2014]

Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children*, continued

B. Respondent's (your spouse's) birth year and present residence: _____
Birth year

Respondent's present street address *City* *State* *ZIP code*

County *()* *Phone number* *Email address*

C. Other person, if any, who has visitation or custody rights of the parties' children:
Fill in as much information as you know.

Full name: first, middle, last

Present street address *City* *State* *ZIP code*

County *()* *Phone number* *Email address*

2. General Information About the Marriage and the Parties

A. Date and location of the marriage

_____, _____, _____
Month *Day* *Year* *City* *State*

B. Children

Check all that are true

- (1) There are children under age 18 who are children of both Petitioner and Respondent.
- (2) There are children under age 18 who were adopted or born during this marriage.
This includes any child born to a spouse during the marriage, but for whom the other spouse is not a parent.
- (3) There are children 18 years or older who still need support.
- (4) Petitioner or Respondent is pregnant.

C. Identification of children

First, middle, & last initials of each child	Birth year
(1)	
(2)	
(3)	

First, middle, & last initials of each child	Birth year
(4)	
(5)	
(6)	

Check this box if you have attached a separate sheet listing additional children.

D. Children's living arrangements

Places where the children have lived during the last five years and the parent(s) or adult(s) who acted as parent(s): *Fill in as much information as you know.*

(1) Children: _____
Initials *Initials* *Initials* *Initials* *Initials*

Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children*, continued

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(2) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(3) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(4) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(5) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

Check this box if you have attached a separate sheet listing additional children.
If the children have been in Iowa for less than six months, you may be able to get a divorce, but you might not be able to get custody. The rules are complicated and you may need to talk to an attorney.

E. Petitioner's residence

You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce. If you do not live in Iowa, you can only get a divorce in Iowa if your spouse lives in Iowa.

If you have questions about this, talk to an attorney.

(1) The **only** reason that Petitioner (you are Petitioner) is living in Iowa is just to get a divorce.

- True
- False *If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False."*

Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children*, continued

(2) Petitioner has lived in Iowa for the last _____ years and _____ months
in _____ county.

- *If you have always lived in Iowa, count the time since your birth.*
- *If you have been a resident of another state, count the time since you last moved to Iowa.*

F. Parties' residence

If your spouse does not live in Iowa, you must have lived in Iowa for the last year before you may obtain a divorce in Iowa.

Check each that is true

- (1) Petitioner has lived in Iowa for more than one year.
(2) Respondent (your spouse) is a resident of Iowa.

G. Condition of the marriage

Check all that are true

- (1) The marriage is broken and cannot be saved.
(2) This is the only divorce case going on involving this marriage.
*If you **did not** check (2), explain in 4. You should also talk to an attorney.*
(3) This Petition is being filed in good faith for the purpose of ending the marriage.
(4) Counseling will not save the marriage. *If counseling may save the marriage, do not check (4).*

H. Respondent's status

Check each that is true

- (1) Respondent (your spouse) is in the military service.
If you check (1), there are special rules that may prevent your case from going forward if your spouse is in the military. You should talk to an attorney.
(2) Respondent is in prison or jail at _____ in _____.
Name of facility State

I. Protective or no contact order

Check one

- (1) There is neither a "protective order" nor a "no contact order" between Petitioner (you) and Respondent (your spouse).
(2) There is a "protective order" or a "no contact order" between Petitioner and Respondent.
If you check (2), fill in the following information:
a. County and state where the order came from: _____
County State
b. Court case number: _____

3. Other Cases About the Children

Check A or B

- A. There are no other cases about the children. *If you check A, skip to 4.*
B. There are other cases about the children.

If there is an order from out of state about the children, an Iowa court may not be able to issue an order about custody or visitation. The rules are complicated and you may need to talk to an attorney.

Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children*, continued

If you check B, fill in the applicable information below.

(1) Juvenile court

Check a or b.

a. There is no juvenile court case.

b. There is a juvenile court case.

If you check b, fill in the following information:

i. County and state of the juvenile court case: _____
County State

ii. Juvenile court case number: _____

Check one

(a) Concurrent jurisdiction has been granted.

(b) Concurrent jurisdiction has not been granted.

If the juvenile court has not given concurrent jurisdiction (permission), then child custody cannot be decided in this case. You should talk to an attorney.

(2) Custody order

You might not be able to get custody in Iowa if there is a custody order entered in another state.

Check a or b.

a. There is no custody order.

b. There is a custody order.

If you check b, fill in the following information:

i. County and state where the custody order came from: _____
County State

ii. Court case number: _____

(3) Child support order

Check a or b.

a. There is no child support order.

b. There is a child support order.

If you check b, fill in the following information:

i. County and state where the child support order came from: _____
County State

ii. Court case number: _____

4. Other Information All of the basic information you need to tell the court is listed on this form.
Provide other information only if you need to explain something.

5. Petitioner's Request

A. Petitioner asks the court to:

Check all that apply. The court will only consider items that are checked.

(1) End the marriage of Petitioner (you) and Respondent (your spouse).

Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children*, continued

- (2) Decide custody and visitation.
- (3) Order child support and medical support.
- (4) Order payment of school or college tuition.
- (5) Fairly divide the property and the debts of the parties.
- (6) Order that Respondent pay the court fees.
- (7) Order that Respondent pay for Petitioner's attorney's fees before the divorce is final.
If you check (7), you must file form 222.
- (8) Order that Respondent pay spousal support (alimony) to Petitioner.
If you check (8), you must file form 222.
- (9) Change Petitioner's last name to: _____ *Name can only be changed to name on birth certificate or name used immediately prior to the marriage.*
Print your former or birth name
- (10) Order counseling to save the marriage.
- (11) Other request: _____

Continued on next page

Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children*, continued

6. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

<i>Name of attorney or organization, if any</i>	<i>Attorney's P.I.N. # – Ask the attorney</i>
<i>Business address of attorney or organization</i>	<i>City</i>
<i>State</i>	<i>ZIP code</i>
<i>()</i>	<i>()</i>
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>
<i>Attorney's email address – optional</i>	

7. Service Instructions

If Petitioner is filing in paper,

Check one

- A. Petitioner will accept service of documents at the attorney's address listed above; or
- B. Petitioner will accept service of documents in this case at the mailing address below.

8. Oath and Signature

I, _____, have read this Petition, and I certify under penalty

Print your name

of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Petition is true and correct.

_____, 20____

*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

() _____
Phone number Email address Additional email address, if applicable

* Whether filing electronically or in paper, you must *handwrite* your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Important Notice to Petitioner
 See next page for instructions for filing a Petition.

Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children***Do not file these instructions****Instructions for Filing a Petition for Dissolution of Marriage with Children**

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically unless you get permission from the court to file in paper.** Contact the clerk of court in your county if you are unable to file electronically.

 Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to electronically file. For help with registration, *see* the eFiler's User Guide [How to Register Pro Se \(Self Represented\) for eFiling](#) on the Iowa Judicial Branch website.
- After you have registered, [log in to the electronic filing system](#) to electronically file your dissolution case.
- For help electronically filing your divorce, *see* [How to eFile a New Case](#).
- With your Petition, you must also file an Original Notice (204) and a Protected Information Disclosure Form (211).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your filing. For help, *see* [How to Resubmit a Returned Filing](#).
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please *see* [My Filings Reference Guide](#).

 Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless you have received permission from the court to file in paper.
- With your Petition (201), you must also file a Petition Cover Sheet (202), an Original Notice (204a), and a Confidential Information Form (203).
- Forms 201 and 204a: Make **two** photocopies if you can deliver copies of these forms to your spouse in-person or by mail. Make **three** photocopies if you are going to ask the county sheriff or a civil process server to deliver these forms to your spouse.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.
- Forms 202 and 203: You do **not** have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county. Tell the clerk at the counter you are filing a Petition for a divorce.

Instructions for Rule 17.200—Form 201: *Petition for Dissolution of Marriage with Children*, continued

- Give the clerk at the counter these forms:
 - 201 Petition for Dissolution of Marriage with Children
 - 202 Coversheet for a Petition for Dissolution of Marriage with Children
 - 203 Confidential Information Form (*Do not make copies of this form.*)
 - 204a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 209.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (204a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.200—Form 203: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

Iowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*
The spouse who files the Petition

and concerning

Respondent *Full name: first, middle, last*
The other spouse

Equity case no. _____

Confidential Information Form

1. Petitioner's Information

Full name: first, middle, last ____/____/____
Birth date ____-____-____
Social Security number

2. Respondent's Information

Full name: first, middle, last ____/____/____
Birth date ____-____-____
Social Security number

3. Children's Information

Child 1:

Full name: first, middle, last ____/____/____
Birth date ____-____-____
Social Security number

Child 2:

Full name: first, middle, last ____/____/____
Birth date ____-____-____
Social Security number

Child 3:

Full name: first, middle, last ____/____/____
Birth date ____-____-____
Social Security number

Child 4:

Full name: first, middle, last ____/____/____
Birth date ____-____-____
Social Security number

Continued on next page

Rule 17.200—Form 203 *Confidential Information Form*, continued

Child 5:

_____ / ____ / _____ _____ - ____ - _____
Full name: first, middle, last Birth date Social Security number

Check this box if you have attached a separate sheet listing additional children.

4. Signature of Provider of Information

Information provided by: _____
Print your full name: first, middle, last

_____, 20____
Your signature Month Day Year

Important Notice:

Do not give copies of this form to anyone except the clerk of court.

Rule 17.200—Form 204: Original Notice for Personal Service

Petitioner must serve the Petition on Respondent within 90 days after filing the Petition. Failure to meet this deadline may result in the court dismissing the divorce case.

Read the [Guide to Representing Yourself in an Iowa Divorce Case with Children](#) on the Iowa Judicial Branch website for additional important instructions. Iowa divorce forms are available free of charge on the [Iowa Judicial Branch website](#).

-  If filing electronically, **Petitioner must complete this form.**
-  If filing in paper, Petitioner must use form 204a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Petition is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Original Notice for Personal Service

To Respondent Named Above

- Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent.
- A copy of the Petition for Dissolution of Marriage with Children is attached to this Notice.
- Petitioner asks for a divorce.

Petitioner’s contact information during the divorce case: _____
Petitioner’s name

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address*

Important instructions for Respondent on next page

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.** Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.200—Form 204: *Original Notice for Personal Service*, continued

Instructions to Respondent

- A. You **must** file an Answer or a Motion with the clerk of court in the above county within **20 days** after you receive this Original Notice. If you do not file an Answer or Motion within **20 days** after receiving this Original Notice, the **court may enter a judgment against you** giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at <http://www.iowacourts.gov/> and click on “Court Rules & Forms” or on “For the Public.”
- C. If you received Petition form **201**, you may use Answer form **215**.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at <https://www.iowacourts.state.ia.us/Efile> and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper. Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner’s attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent

You should talk to an attorney at once to protect your interests.

Rule 17.200—Form 204a: Original Notice for Personal Service

Petitioner: Use this form only if filing in paper.

Read the *Guide to Representing Yourself in an Iowa Divorce Case with Children* for additional important instructions. Iowa divorce forms are available free of charge on the Iowa Judicial Branch website.

-  *If filing electronically, Petitioner must use form 204.*
-  *If filing in paper, Petitioner must use this form.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Petition is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p>Original Notice for Personal Service</p>
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1. To Respondent Named Above

- Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent.
- A copy of the Petition for Dissolution of Marriage with Children is attached to this Notice.
- Petitioner asks for a divorce.

Petitioner's contact information during the divorce case: _____
Petitioner's name

Mailing address City State ZIP code

(_____) _____
Phone number Email address

2. Instructions to Respondent Named Above

- You **must** file an Answer or a Motion with the clerk of court in the above county within **20 days** after you receive this Original Notice. If you do not file an Answer or Motion within **20 days** after receiving this Original Notice, the **court may enter a judgment against you** giving Petitioner what he or she asked for in the Petition.
- If you received Petition form **201**, you may use Answer form **215**.
- After you file your Answer or Motion, you must serve a copy of it on Petitioner.

(SEAL)

Clerk of Court

Important Notice to Respondent

You should talk to an attorney at once to protect your interests.

_____ County Courthouse
_____, Iowa _____
City ZIP code

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.** Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.200—Form 205: Acceptance of Service

Petitioner must complete this section:

In the Iowa District Court for _____ County <i>County where Petition is filed</i>	
Upon the Petition of <hr/> Petitioner <i>Full name: first, middle, last</i> and concerning <hr/> Respondent <i>Full name: first, middle, last</i>	Equity case no. _____ <div style="text-align: center;">Acceptance of Service</div>
<i>Petitioner must file this form with the clerk of court soon after Respondent signs it.</i>	

Respondent must complete this section:

Respondent's Acceptance of Service, Oath, and Signature	
<i>If Respondent completes this Acceptance of Service, Respondent must return this form to Petitioner soon after signing it. Petitioner will file it with the clerk of court.</i>	
I, _____, am Respondent in this case. I received a copy <i>Print your name</i>	
of the Original Notice and the Petition for this case. I have read this Acceptance of Service. I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Acceptance of Service is true and correct.	
Signed: _____, 20____ <i>Month Day Year</i>	_____ <i>Respondent's signature</i>
_____ <i>Respondent's mailing address</i>	_____ <i>City State ZIP code</i>
(_____) _____ <i>Phone number</i>	_____ <i>Email address</i>

Important Notice to Respondent

By signing this form, you are not agreeing to what Petitioner wants.
You are only agreeing that you received a copy of the Original Notice and Petition.

Rule 17.200—Form 206: *Directions for Service of Original Notice*

Petitioner: Complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

- Do not use this form if Respondent has already received the Petition and Original Notice.
- Do not file this form with the clerk of court in paper or electronically.
- Give this form to the sheriff or other process server with your Petition (201) and Original Notice (204 if electronically filing or 204a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

County where Petition is filed

Equity case number

1. Name and Location of Sheriff or Other Process Server

Check one and fill in the blanks

A. **Sheriff** *In county where Respondent will be served*

_____ County

Street address

City

State

ZIP code

B. **Other process server**

Name of other person serving the Notice

Street address

City

State

ZIP code

2. Person to be Served

Your spouse's name

(_____) _____
Phone number

Address where your spouse can be served

City

State

ZIP code

3. Person Requesting Service

Your name

(_____) _____
Phone number

Your present mailing address

City

State

ZIP code

4. Special Instructions for Service *Provide information that will help the sheriff or process server in delivering papers to Respondent.*

Continued on next page

Rule 17.200—Form 206: *Directions for Service of Original Notice*, continued

5. Costs of Service

Check one

A. Petitioner will pay the costs of the Sheriff or other process server.

If you cannot afford the costs, file form 209.

B. Costs for Sheriff deferred by court order: _____

Clerk of court: Sign only if costs deferred by court order

6. Notification

After completion of service, the sheriff or other process server will notify the person requesting service.

_____, 20____
Signed: Month Day Year Your signature

Rule 17.200—Form 207: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition.
- Ask if the newspaper will publish your Original Notice by Publication (208) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where you filed the Petition

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

**Motion and Affidavit to
Serve by Publication**

1. Information and Requests

A. Respondent's residence

Check each that applies

- (1) Respondent lives outside of Iowa.
- (2) Respondent's residence and place of employment are unknown.

B. Respondent's last known residence:

Street address _____ *City* _____ *State* _____ *ZIP code*

County _____ *Phone number* _____ *Email address*

C. Most recent date Respondent is known to have been at the address above:

_____, 20_____
Month *Day* *Year*

Rule 17.200—Form 207: *Motion and Affidavit to Serve by Publication*, continued

D. Petitioner has taken these steps to find Respondent: _____

E. Petitioner will publish notice in this newspaper: _____
Name of newspaper

F. Petitioner asks the court to allow Petitioner to serve Respondent by publication because Respondent cannot be personally served.

Continued on next page

Rule 17.200—Form 207: *Motion and Affidavit to Serve by Publication*, continued

2. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Oath and Signature

I, _____, have read this Motion and Affidavit, and I certify
Print your name

under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Motion and Affidavit is true and correct.

_____, 20_____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address, if applicable*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 208: Original Notice by Publication

Petitioner: Complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

In the Iowa District Court for _____ County

County where Petition is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Original Notice by Publication

1. Information for Respondent Named Above

- Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent.
- Petitioner's contact information during the divorce case:

Petitioner's name: First, middle, last

Petitioner's present street address _____
City _____
State _____
ZIP code

County _____
Phone number _____
Email address

2. Respondent's Deadline for Filing a Response

You must file an Answer or a Motion with the clerk of court in the above county within **20 days** after

_____, 20____.
Month _____
Day _____
Year

3. Instructions to Respondent Named Above

You must file an Answer or a Motion with the clerk of court in the above county within **20 days** after the date provided above. If you do not respond, the **court may enter a judgment against you** giving Petitioner what he or she asked for in the Petition.

Important Notice to Respondent

- You should talk to an attorney at once to protect your interests.
- If you choose not to have an attorney represent you in this matter, go to the Iowa Judicial Branch website for [self-represented litigant information](#) and [family law forms](#).

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.** Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.200—Form 208: *Original Notice by Publication*, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under “eFiling,” or call the clerk of court office in your county.

Additional Information for Respondent

- You must register to eFile through the Iowa Judicial Branch website at <https://www.iowacourts.state.ia.us/Efile/> and obtain a log in and password to file and view documents in your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.200—Form 209: *Application and Affidavit to Defer Payment of Costs*

Petitioner: Use this form only if you cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff **cannot be waived**. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County <i>County where your case is filed</i>	
Upon the Petition of <hr/> Petitioner <i>Full name: first, middle, last</i> and concerning <hr/> Respondent <i>Full name: first, middle, last</i>	Equity case no. _____ <div style="text-align: center;">Application and Affidavit to Defer Payment of Costs</div>

1. Request and Information

A. I am Petitioner.

B. For my Application and Affidavit, I state that:

Check all that apply

- (1) I am unable to pay the filing fee or service costs or other court costs.
- (2) I ask the court for permission to proceed without prepayment of costs and fees.
- (3) I am filing this Application and Affidavit in good faith.
- (4) I believe I am entitled to what I am asking for in this case.

C. Household

There are _____ people living in my household.
Number

D. My household income is \$ _____ per month.

Put the total amount of all income and benefits before deductions for all members of your household.

E. My income comes from:

List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIP.

Continued on next page

Rule 17.200—Form 209: *Application and Affidavit to Defer Payment of Costs*, continued

F. My household has the following monthly expenses:

- (1) Rent or mortgage \$ _____
- (2) Utilities \$ _____
- (3) Phone \$ _____
- (4) Food \$ _____
- (5) Transportation \$ _____

G. I have \$ _____ in cash, checking, and savings.

Continued on next page

Rule 17.200—Form 209: *Application and Affidavit to Defer Payment of Costs*, continued**2. Attorney Help***Check one*

- A. An attorney did not help me prepare or fill in this paper.
 B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Certification of Service by Mailing or Delivery*Section 3 to be completed only if filing in paper or if the other party is exempt from electronic filing.**This document, if filed electronically, will automatically be served on registered parties.*

I, _____, certify that on _____, 20_____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Application and Affidavit to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

4. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the laws of
Print your name

the State of Iowa that I have read this Application and Affidavit and that the information I have provided in this Application and Affidavit is true and correct.

_____, 20_____
Signed on: Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address – if available*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 210: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

Petitioner: Use this form only if someone other than Petitioner (you), or a person who is not a sheriff or a process server, delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Petition is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

1. Affidavit

I, _____, delivered a copy of the Original Notice and
Name of person – Cannot be Petitioner, sheriff, or process server

Petition for Dissolution of Marriage for this case to:

_____ on _____, 20____ at _____
Name of Respondent Month Day Year Time

Check one
 a.m.
 p.m.

by handing Respondent copies of the attached papers.

2. Oath and Signature

To be completed by the person who gave the Petition and Original Notice to Respondent.

I, _____, have read this Affidavit of Service, and I certify
Print your name

under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Affidavit of Service is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address – if available

* *If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 211: *Protected Information Disclosure*

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

 **If filing electronically:**

- **Petitioner** must complete this form (211) and file it with the Petition (201) and Original Notice (204).
- **Respondent** must complete this form if adding or correcting protected information.

 **Paper filers** also may use form 211 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County

County where the case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Protected Information Disclosure

For electronic filers:

When protected information, as defined in Iowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to Iowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner *The spouse who filed for divorce.*

Provide the complete version of protected information and the redacted version included in documents you file.

Name _____
First Middle Last

Protected Information Type	Complete Information <small>(See Rules 16.602 and 16.604)</small>	Redacted Information <small>(See Rule 16.605)</small>
A. Social security number	- - XXX-XX-XXXX	<i>Last four digits only</i>
B. Financial account numbers	<i>Full account number</i>	<i>Partial account number only</i>
C. Date of birth	/ / mm/dd/yyyy	<i>Year only</i>
D. Individual taxpayer identification numbers	- - XXX-XX-XXXX	<i>Last four digits only</i>

Rule 17.200—Form 211: *Protected Information Disclosure*, continued

E. Personal identification numbers	<i>Full number</i>	<i>Partial only</i>
F. Other unique identifying numbers	<i>Full number</i>	<i>Partial only</i>
G. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
H. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
I. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
J. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

2. Respondent *The spouse who did not file for divorce.*

Provide the complete version of protected information and the redacted version included in documents you file. If Petitioner is filling out this form, provide as much information about Respondent as you can.

Name _____
 First *Middle* *Last*

Protected Information Type	Complete Information <small>(See Rules 16.602 and 16.604)</small>	Redacted Information <small>(See Rule 16.605)</small>
A. Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
B. Financial account numbers	<i>Full account number</i>	<i>Partial account number only</i>
C. Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>
D. Individual taxpayer identification numbers	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
E. Personal identification numbers	<i>Full number</i>	<i>Partial only</i>
F. Other unique identifying numbers	<i>Full number</i>	<i>Partial only</i>
G. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
H. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
I. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
J. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Rule 17.200—Form 211: *Protected Information Disclosure*, continued

3. Other Parties

Provide the complete version of protected information and the redacted version included in documents you file. Provide as much information about other parties as you can.

Name _____
First Middle Last

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	- - XXX-XX-XXXX	<i>Last four digits only</i>
B. Financial account numbers	<i>Full account number</i>	<i>Partial account number only</i>
C. Date of birth	/ / mm/dd/yyyy	<i>Year only</i>
D. Individual taxpayer identification numbers	- - XXX-XX-XXXX	<i>Last four digits only</i>
E. Personal identification numbers	<i>Full number</i>	<i>Partial only</i>
F. Other unique identifying numbers	<i>Full number</i>	<i>Partial only</i>
G. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
H. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
I. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
J. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>

Check this box if you are attaching a separate sheet listing additional information for other parties.

4. Children

Provide the complete version of protected information and the redacted version included in documents you file.

A.

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - XXX-XX-XXXX	<i>Last four digits only</i>
(3) Date of birth	/ / mm/dd/yyyy	<i>Year only</i>

Rule 17.200—Form 211: *Protected Information Disclosure*, continued

B. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

C. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

D. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

E. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

Check this box if you are attaching a separate sheet listing additional children.

Continued on next page

Rule 17.200—Form 211: *Protected Information Disclosure*, continued

5. Information provided by:

	/s/	
<i>Handwritten signature of Petitioner or attorney if filing in paper</i>		<i>Electronic signature of Petitioner or attorney if filing electronically</i>

Law firm, if applicable

<i>Mailing address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>

(_____) _____
Phone number

<i>Email address</i>	<i>Additional email address, if applicable</i>

<i>Month</i>	<i>Day</i>	<i>20</i>	<i>Year</i>		
<i>Date information provided</i>					

Rule 17.200—Form 212: Joint Statement on Legal Parent

- The parties use this form if a child is born or conceived during the marriage and both parties want the court to find that one of the parties is not a **legal parent** of the child. *Note:* For purposes of this form, **legal parent** is a person who is recognized by law as a parent to a child because of marriage.
- This form tells the court that both parties agree that one party is not a **biological parent** and should be *disestablished* as (should no longer be) a legal parent of the child.
- This form can only be used if the party being disestablished is a legal parent of the child because of the marriage of the parties and there is a pending dissolution of marriage action in Iowa. Do not use this form if the party being disestablished is a legal parent of the child because of an affidavit, court order, or action in another state.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Equity case no. _____

Petitioner *Full name: first, middle, last*

Joint Statement on Legal Parent

and concerning

Respondent *Full name: first, middle, last*

1. Legal Parent

Check each that applies

A. _____ is a legal parent but not a biological parent of
Petitioner's or Respondent's name
Petitioner's or Respondent's unborn child expected to be born _____.
Expected due date

B. _____ is a legal parent but not a biological parent of the
Petitioner's or Respondent's name
following children born during the marriage:

List children's initials and birth year

First, middle, & last initials of each child	Birth year
(1)	
(2)	
(3)	

First, middle, & last initials of each child	Birth year
(4)	
(5)	
(6)	

Check this box if you have attached a sheet listing additional children for whom Petitioner or Respondent is not a biological parent.

Continued on next page

Rule 17.200—Form 212: *Joint Statement on Legal Parent*, continued

2. Biological Parent

The biological parents, if known, of the children are as follows:

First, middle, & last initials of each child	Biological parent	First, middle, & last initials of each child	Biological parent
(1)		(4)	
(2)		(5)	
(3)		(6)	

3. Best Interests of the Children

It is in the best interests of the children and the parties that _____
Petitioner's or Respondent's name
 is found not to be a legal parent of the child or children.

4. Guardian Ad Litem

We understand that the court may appoint a guardian ad litem (an attorney) for the child or children, and that we may have to pay the costs of the guardian ad litem.

5. Request

We ask the court to find and conclude that the legal parent, _____
Petitioner's or Respondent's name
 is not a biological parent of the child or children, including any unborn child, listed in section 1 above, and that the court disestablish that person as a legal parent of the child or children.

6. Attorney Help

A. **Petitioner** *Check one*

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.

If you check (2), you must fill in the following information:

<i>Name of attorney or organization, if any</i>	<i>Attorney's P.I.N. # – Ask the attorney</i>
<i>Business address of attorney or organization</i>	<i>City</i>
<i>()</i>	<i>()</i>
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>
	<i>Attorney's email address – optional</i>

Continued on next page

Rule 17.200—Form 212: *Joint Statement on Legal Parent*, continued

B. Respondent *Check one*

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.
If you check (2), you must fill in the following information:

Name of attorney or organization, if any	Attorney's P.I.N. # – Ask the attorney		
Business address of attorney or organization	City	State	ZIP code
()	()		
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>	<i>Attorney's email address – optional</i>	

7. Oaths and Signatures

A. Petitioner's Oath and Signature

I, _____, have read this Joint Statement, and I certify under penalty of
Print your name
 perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Joint Statement is true and correct.

		20	
<i>Month</i>	<i>Day</i>	<i>Year</i>	<i>Petitioner's signature*</i>

Mailing address	City	State	ZIP code
-----------------	------	-------	----------

()		
<i>Phone number</i>	<i>Email address</i>	<i>Additional email address – if available</i>

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

B. Respondent's Oath and Signature

I, _____, have read this Joint Statement, and I certify under penalty of
Print your name
 perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Joint Statement is true and correct.

		20	
<i>Month</i>	<i>Day</i>	<i>Year</i>	<i>Respondent's signature*</i>

Mailing address	City	State	ZIP code
-----------------	------	-------	----------

()		
<i>Phone number</i>	<i>Email address</i>	<i>Additional email address – if available</i>

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 213: Motion to Disestablish Legal Parent

- A party uses this form if a child is born or conceived during the marriage and one of the parties wants the court to find and conclude that one of the parties is not a biological parent of the child and should be *disestablished* as (should no longer be) a legal parent of the child.
- For purposes of this form, **legal parent** is a person who is recognized by law as a parent to the child because of marriage.
- This form can only be used if the party sought to be disestablished is a legal parent of the child because of the marriage of the parties and there is a pending dissolution of marriage action in Iowa. If the party sought to be disestablished is a legal parent of the child because of an affidavit, court order, or action in another state, do not use this form.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Motion to Disestablish Legal Parent</p>
--	--

I am *Check one*

- A. Petitioner
- B. Respondent

1. Legal Parent *Check each that applies.*

- A. _____ is a legal parent but may not be a biological parent
Petitioner's or Respondent's name
of Petitioner's or Respondent's unborn child expected to be born _____.
Expected due date
- B. _____ is a legal parent but may not be a biological parent
Petitioner's or Respondent's name
of the following children born during the marriage:

List children's initials and birth year

First, middle, & last initials of each child	Birth year
(1)	
(2)	
(3)	

First, middle, & last initials of each child	Birth year
(4)	
(5)	
(6)	

- Check this box if you have attached a sheet listing additional children for whom Petitioner or Respondent is not the biological parent.*

Rule 17.200—Form 213: *Motion to Disestablish Legal Parent*, continued

2. Genetic Tests

Check each that applies

- A. I agree to cooperate with getting any genetic test that the court orders.
- B. I understand that I may have to pay for any genetic test that the court orders.
- C. Genetic tests* have been done and show _____ is not the
Petitioner's or Respondent's name
biological parent.

***Note on genetic tests:** Genetic testing must be done by an accredited laboratory with verified documentation of the chain of custody, and the laboratory must send the evaluation report directly to the clerk of court. See Iowa Code sections 600B.41 and 600B.41A.

3. Request

I ask the court to:

- A. Appoint a guardian ad litem (an attorney) for the child or children. I understand that I may have to pay the costs of the guardian ad litem.
- B. Order genetic tests if needed and order that Petitioner, Respondent, and children go for testing.
- C. Find that _____, if excluded by genetic testing, is not a
Petitioner's or Respondent's name
biological parent of the child or children, including any unborn child, listed in section 1 above, and that the court disestablish that person as a legal parent of the child or children.

4. Child Support Recovery Unit (CSRU)

Check one

- A. CSRU is providing services.
Note: You must give a copy of this Motion to CSRU if it is providing services.
- B. CSRU is not providing services.

Continued on next page

Rule 17.200—Form 213: *Motion to Disestablish Legal Parent*, continued

5. Attorney Help

Check one

A. An attorney did not help me prepare or fill in this paper.

B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

6. Certification of Service by Mailing or Delivery

Section 6 to be completed only if filing in paper or if the other party is exempt from electronic filing.

This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Motion to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

7. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Motion and that the information I have provided in this Motion is true and correct.

_____, 20____
Signed on: Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address – if available*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

- Read the [Guide to Representing Yourself in an Iowa Divorce Case with Children](#) on the Iowa Judicial Branch website before using this form.
- Use this Answer form 215 if you received Petition form 201, otherwise use form 216.
-  *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.*
-  *If filing in paper, you may use form 211.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your spouse filed the Petition

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Your spouse's full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Your full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Answer to Petition for Dissolution of Marriage with Children</p>
---	---

1. Personal Information *Fill in all information that you know.*

A. Petitioner's information

Check one

If paragraph 1A of the Petition (form 201) is not correct, check (2) and fill in the blanks.

- (1) Petitioner's (your spouse's) birth year and present residence are correct in the Petition.
- (2) Petitioner's birth year and present residence are not correct in the Petition.

The correct information is: _____
Birth year

_____ *Present street address* _____ *City* _____ *State* _____ *ZIP code*

_____ *County* (_____) _____ *Phone number* _____ *Email address*

B. Respondent's information

Check one

If paragraph 1B of the Petition (form 201) is not correct, check (2) and fill in the blanks.

- (1) Respondent's (your) birth year and present residence are correct in the Petition.
- (2) Respondent's birth year and present residence are not correct in the Petition.

The correct information is: _____
Birth year

Rule 17.200—Form 215: *Answer to Petition for Dissolution of Marriage with Children*, continued

Present street address *City* *State* *ZIP code*

County (_____) _____
Phone number *Email address*

C. Other person, if any, who has visitation or custody rights of the parties' children:*Fill in as much information as you know.**Check one**If paragraph 1C of the Petition (form 201) is not correct, check (2) and fill in the blanks.*

- (1) The information for the other person who has visitation or custody rights of the children is correct in the Petition.
- (2) The information for the other person who has visitation or custody rights of the children is not correct in the Petition. The correct information is:

Full name: first, middle, last

Present street address *City* *State* *ZIP code*

County (_____) _____
Phone number *Email address*

2. General Information About the Marriage and the Parties**A. Date and location of the marriage***Check one**If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks.*

- (1) The date and location of the marriage are correct in the Petition.
- (2) The date and location of the marriage are not correct in the Petition.

The correct information is:

_____, _____, _____, _____, _____
Month *Day* *Year* *City* *State*

B. Children*Check one**If paragraph 2B of the Petition (201) is not correct, check (2) and all items that are true.*

- (1) The Petition provides the correct information about the children.
- (2) The Petition does not provide the correct information about the children.
 The correct information is:
- There are children under age 18 who are children of both Petitioner and Respondent.
 - There are children under age 18 who were adopted or born during this marriage.
This includes any child born to a spouse during the marriage, but for whom the other spouse is not a parent.
 - There are children 18 years or older who still need support.
 - Petitioner or Respondent is pregnant.

Rule 17.200—Form 215: *Answer to Petition for Dissolution of Marriage with Children*, continued

C. Identification of children

Check one

If paragraph 2C of the Petition (201) is not correct, check (2) and provide the correct information about the children's identification.

- (1) The children are identified correctly in the Petition.
- (2) The children are not correctly identified in the Petition. The correct information is:

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

Check this box if you have attached a separate sheet listing additional children.

D. Children's living arrangements

Check one

If paragraph 2D of the Petition (201) is not correct, check b and provide the correct information about the children's residence.

- a. The information about where the children have lived is listed correctly in the Petition.
- b. The information about where the children have lived is not listed correctly.
The correct information is: *List children by initials only*

i. Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

ii. Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

iii. Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

iv. Children: _____
Initials Initials Initials Initials Initials

Rule 17.200—Form 215: *Answer to Petition for Dissolution of Marriage with Children*, continued

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

v. Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

Check this box if you have attached a separate sheet listing additional children.

If the children have been in Iowa for less than six months, the court may not be able to issue an order about custody or visitation. The rules are complicated, and you may need to talk to an attorney.

E. Petitioner's residence

(1) The **only** reason that Petitioner (your spouse) is living in Iowa is just to get a divorce.

True

False *If Petitioner does not live in Iowa, or if Petitioner lives in Iowa for reasons other than just to get a divorce, check "False."*

(2) *If you disagree with paragraph 2E(2) of the Petition (201), fill in the blanks.*

Petitioner has lived in Iowa for the last _____ years and _____ months

In _____ county.

F. Parties' residence

Check each that is true

(1) Petitioner (your spouse) has lived in Iowa for more than one year.

If you did not check (1) or (2), you should talk to an attorney.

(2) Respondent (you are Respondent) is a resident of Iowa.

G. Condition of the marriage

Check all that are true

(1) The marriage is broken and cannot be saved.

(2) This is the only divorce case going on in involving this marriage.

If you did not check (2), explain in 4. You should also talk to an attorney.

(3) Petitioner did not file the Petition in good faith for the purpose of ending the marriage.

(4) Counseling will not save the marriage. *If counseling may save the marriage, do not check (4).*

H. Respondent's status

Check each that is true

(1) Respondent (you are Respondent) is in the military service.

There are special rules that may prevent this dissolution from going forward if you are in the military. You should talk to an attorney.

Rule 17.200—Form 215: *Answer to Petition for Dissolution of Marriage with Children*, continued

(2) Respondent is in prison or jail at _____ in _____.
Name of facility State

If you are in prison or jail, you may be entitled to a “guardian ad litem,” a person, usually an attorney, appointed to protect the interests of a spouse in some cases.

I. Protective or no contact orders

Check one

(1) There is neither a “protective order” nor a “no contact order” between Respondent (you) and Petitioner (your spouse).

(2) There is a “protective order” or “no contact order” between Respondent and Petitioner.

If you check (2), fill in the following information:

a. County and state where the order came from: _____
County State

b. Court case number: _____

3. Other Cases About the Children

Check A or B

A. All of the information in 3 in the Petition about other cases about the children is correct.
If you check A, skip to 4.

B. Some or all of the information in 3 in the Petition about other cases about the children is not correct. The correct information is:

If you check B, fill in the correct information below.

(1) Juvenile court

Check a or b.

a. There is no juvenile court case.

b. There is a juvenile court case. The correct information is:

If you check b, fill in the following information:

i. County and state of the juvenile court case: _____
County State

ii. Court case number: _____

Check one

(a) Concurrent jurisdiction has been granted.

(b) Concurrent jurisdiction has not been granted.

If the juvenile court has not given concurrent jurisdiction (permission), then child custody cannot be decided in this case. You should talk to an attorney.

(2) Custody order

Check a or b.

a. There is no custody order.

b. There is a custody order.

If you check b, fill in the following information:

i. County and state where the custody order came from: _____
County State

ii. Court case number: _____

Rule 17.200—Form 215: *Answer to Petition for Dissolution of Marriage with Children*, continued**9. Oath and Signature**

I, _____, have read this Answer, and I certify under penalty
Print your name

of perjury and pursuant to the laws of the State of Iowa that the information I have provided
 in this Answer is true and correct.

_____, 20_____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address – if available

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically*

Important Instructions for filing this form on next page.

Instructions for Rule 17.200—Form 215: *Answer to Petition for Dissolution of Marriage with Children*, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically unless you get permission from the court to file in paper.** Contact the clerk of court in your county if you are unable to file electronically.

Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide [How to Register Pro Se \(Self-Represented\) for eFiling](#) on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may [directly log in to EDMS](#); or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see [How to eFile to an Existing Case](#).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see [How to Resubmit a Returned Filing](#).
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Petition was filed. The county is listed at the top of the Petition (form 201).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, **or** mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Petition if box 7A on the Petition is checked.

Do not file these instructions

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 201, use form 215 for your Answer.

Read the [Guide to Representing Yourself in an Iowa Divorce Case](#) on the Iowa Judicial Branch website before using this form.

-  *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211).*
-  *If filing in paper, you may use form 211 to provide any protected information in full.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Petition is filed

Upon the Petition of

Petitioner *Your spouse's full name: first, middle, last*

and concerning

Respondent *Your full name: first, middle, last*

Equity case no. _____

**General Answer to a Petition
for Dissolution of Marriage
with Children**

1. Respondent's Answer *You are Respondent.*

A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

B. Respondent denies that the following paragraphs in the Petition are true:

C. Respondent does not know whether the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know something, such as a date, place, or when something happened.

Rule 17.200—Form 216: *General Answer to a Petition for Dissolution of Marriage with Children*, continued

D. Children's living arrangements

Places where the children have lived during the last five years and the parent(s) or adult(s) who acted as parents:

(1) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(2) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(3) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(4) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

(5) Children: _____
Initials Initials Initials Initials Initials

Lived with _____ from ____/____/____ to ____/____/____
Adult name mm dd yyyy mm dd yyyy

At _____
City State

Check this box if you have attached a separate sheet listing additional children.

If the children have not lived in Iowa for six months, you may be able to get a divorce, but you might not be able to get custody. The rules are complicated and you may need to talk to an attorney.

Rule 17.200—Form 216: *General Answer to a Petition for Dissolution of Marriage with Children*, continued

c. Child support order

Check i or ii.

i. There is no child support order.

ii. There is a child support order.

If you check ii, fill in the following information:

(a) County and state where the child support order came from: _____
County State

(b) Court case number: _____

G. Respondent denies anything in the Petition that is not admitted in this Answer.

H. Other information: _____

2. Respondent's Request *If you do not know what you want, talk to an attorney.*

Respondent asks the court to: *Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.*

Continued on next page

Rule 17.200—Form 216: *General Answer to a Petition for Dissolution of Marriage with Children*, continued

3. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
 B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

4. Service Instructions

If Respondent is filing in paper

Check one

- A. Respondent will accept service of documents at the attorney's address listed above; or
 B. Respondent will accept service of documents in this case at the mailing address below.

5. Certification of Service by Mailing or Delivery

Section 5 to be completed only if filing in paper or if the other party is exempt from electronic filing.

This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Answer to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

6. Oath and Signature

I, _____, have read this Answer, and I certify under penalty
Print your name

of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Answer is true and correct.

_____, 20____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address, if applicable*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically*

Important Instructions for filing this form on next page.

Instructions for Rule 17.200—Form 216: *General Answer to a Petition for Dissolution of Marriage with Children*

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically** unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide [How to Register Pro Se \(Self Represented\) for eFiling](#) on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may [directly log in to EDMS](#); or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see [How to eFile to an Existing Case](#).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see [How to Resubmit a Returned Filing](#).
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Petition was filed. The county is listed at the top of the Petition (form 201).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, **or** mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the attorney's address.

Do not file these instructions

Rule 17.200—Form 221: *Affidavit for Temporary Custody and Visitation*

Form 221 is for either party to tell the court about custody and visitation before the case is finished, or to have a witness tell the court about custody and visitation before the case is finished.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County <i>County where the case is filed</i>	
Upon the Petition of <hr/> Petitioner <i>Full name as it appears on the Petition: first, middle, last</i> and concerning <hr/> Respondent <i>Full name as it appears on the Petition: first, middle, last</i>	Equity case no. _____ <div style="text-align: center;">Affidavit for Temporary Custody and Visitation</div>

1. Statement

- A. My name is _____
Full name of witness: first, middle, last
- B. My relationship to _____
First, middle, last name of party; or initials of child (Do not use child's full name.)
 is:
- C. I understand that a judge may consider this Affidavit to determine temporary custody and visitation of the children in this case. If I were present in court, I would testify as follows:
Attach additional pages if necessary.

Check here if there are additional pages attached.

Continued on next page

Rule 17.200—Form 221: *Affidavit for Temporary Custody and Visitation*, continued

2. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

<i>Name of attorney or organization, if any</i>	<i>Attorney's P.I.N. # – Ask the attorney</i>		
<i>Business address of attorney or organization</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>
<i>()</i>	<i>()</i>	<i>Attorney's email address – optional</i>	
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>		

3. Oath and Signature of Witness

I, _____, certify under penalty of perjury and pursuant to the laws of the State of Iowa that I have read this Affidavit and that the information I have provided in this Affidavit is true and correct.

Signed on: _____, 20____
*Month Day Year Your signature**

<i>Mailing address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>
<i>()</i>	<i>_____</i>	<i>Additional email address – if available</i>	
<i>Phone number</i>	<i>Email address</i>		

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

- *If the witness is not Petitioner or Respondent in this case, give the form to the person who asked you to fill it out.*
- *If the witness is either Petitioner or Respondent in this case, attach the Affidavit to your Motion (form 222).*

Rule 17.200—Form 222: *Motion in a Dissolution of Marriage with Children*, continued

(12) Other request *Explain* _____

B. I am making the request(s) in this Motion because: _____

Continued on next page

Rule 17.200—Form 222: *Motion in a Dissolution of Marriage with Children*, continued

2. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
 B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Certification of Service by Mailing or Delivery

Section 3 to be completed only if filing in paper or if the other party is exempt from electronic filing.

This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Motion to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

4. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Motion and that the information I have provided in this Motion is true and correct. I ask the court to grant this Motion.

_____, 20____
Signed on: Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address – if available*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 223: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 222) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Response to a Motion</p>
--	---

I am

Check one

- A. Petitioner
- B. Respondent

1. Motion

The other party filed a Motion on _____, 20____.
Month Day Year

2. Response

Check A or B.

- A. I agree with the Motion.
- B. I disagree with the request(s) in the Motion to:

If you check B, check all of the following that apply. If you check any box in B, you must tell the court why you disagree with the request in C.

- (1) Change the hearing date that has been set for _____, 20____.
Month Day Year
- (2) Order temporary financial support.
- (3) Order temporary custody and visitation.
- (4) Order temporary child support and medical support.
- (5) Order counseling (conciliation).
- (6) Set a hearing date for a divorce Decree by default.
- (7) Shorten the 90-day waiting period for getting a divorce Decree.
- (8) Award attorney's fees before the divorce is final.
- (9) Award spousal support (alimony) before the divorce is final.

Rule 17.200—Form 223: *Response to a Motion*, continued

- (10) Order genetic testing to decide paternity and require that Petitioner, Respondent, and child appear for testing.
- (11) Appoint an attorney to represent the child (required when asking to disestablish paternity).
- (12) Other request *Explain* _____

C. I disagree with the Motion because: _____

Continued on next page

Rule 17.200—Form 223: *Response to a Motion*, continued

3. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney

Business address of attorney or organization City State ZIP code

(_____) _____ (_____) _____ _____
Attorney's phone number Attorney's fax number – optional Attorney's email address – optional

4. Certification of Service by Mailing or Delivery

*Section 4 to be completed only if filing in paper or if the other party is exempt from electronic filing.
 This document, if filed electronically, will automatically be served on registered parties.*

I, _____, certify that on _____, 20____
Print your name Month Day Year

I mailed or gave a copy of this Response to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address City State ZIP code

5. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the laws of the State of Iowa that I have read this Response and that the information I have provided in this Response is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____ _____
Phone number Email address Additional email address – if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

[Court Order December 19, 2013]

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children

Each party must complete one of these forms. Provide as much information as you can.

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211), if you have not already done so.
- If filing in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p>Financial Affidavit for a Dissolution of Marriage with Children</p>
--	--

I am

Check one

- A. Petitioner
- B. Respondent

I, _____, state that this is a true and complete statement
Print your name
of my assets, debts, and present income as of the _____ day of _____, 20____.
Day *Month* *Year*

1. Assets *Things you and your spouse own.*

A. Real estate

Attach additional sheets if necessary.

**Owner (Whose name is on the deed?): P = Petitioner R = Respondent J = Joint (Both)*

Type of real estate	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1) Homestead <i>Address of the home you own & where you usually live</i>		\$	\$ to:	\$
(2) Other real estate <i>Address of other houses, apartments, or land that you own.</i>		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on real estate.

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

**Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)*

Vehicles <i>Make (e.g. Ford)</i> <i>Year</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net Value <i>Market value minus debt owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on vehicles.

C. Securities, stocks, & bonds

**Owner (Whose name is on the securities, stocks, or bonds?):*

P = Petitioner R = Respondent J = Joint (Both)

Securities, stocks, & bonds <i>Company name</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on securities, stocks, and bonds.

D. Life insurance

**Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)*

Life insurance <i>Company name</i>	Owner* <i>P,R,J</i>	Cash value <i>Not death benefit</i>	Loan from cash value <i>Total amount still owed on loan</i>	Net value <i>Cash value minus loan owed</i>
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

E. Bank accounts

**Owner (Whose name is on the checking or savings account?):*

P = Petitioner R = Respondent J = Joint (Both)

Checking & savings accounts <i>Bank or Credit Union name</i> <i>If you do not use bank accounts,</i> <i>write "Cash"</i>	Owner* <i>P,R,J</i>	Cash value	Personal loans or overdraft accounts <i>Total amount you still owe on it</i>	Net value <i>Cash value minus loan / overdraft owed</i>
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on checking and savings accounts.

F. Household contents

**Owner: P = Petitioner R = Respondent J = Joint (Both)*

Household contents <i>Describe</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1) Furniture		\$	\$	\$
a.		\$	to:	\$
b.		\$	to:	\$
c.		\$	to:	\$
d.		\$	to:	\$
(2) Appliances / Electronics		\$	\$	\$
a.		\$	to:	\$
b.		\$	to:	\$
c.		\$	to:	\$
d.		\$	to:	\$
(3) Other contents		\$	\$	\$
a.		\$	to:	\$

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

b.		\$	\$ to:	\$
c.		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on household assets.

G. Retirement assets

**Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)*

Retirement assets <i>Examples: Pensions, IRAs, 401(k)s, annuities, etc.</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Loan from retirement account <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus loan owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

**Owner: P = Petitioner R = Respondent J = Joint (Both)*

Other assets <i>Describe</i>	Owner* <i>P,R,J</i>	Market value <i>What it would sell for</i>	Debt <i>Total amount you still owe on it and to whom owed</i>	Net value <i>Market value minus debt owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued**I. Totals**

(1) Total from attached sheets	<i>Listed in 1A-H.</i>	\$
(2) Total net value of assets	<i>Listed in 1A-H.</i>	\$ 0.00

2. Other Debts

Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

Include as "Other Debts" money you or your spouse owe that you did not include in the "Debt" or "Loan" columns in 1A-H.

**Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)*

Other debts <i>List only those not included as "debt" or "loans" under "Assets" in part 1.</i>	Whose debt?* <i>P,R,J</i>	Amount owed
A.		\$
B.		\$
C.		\$
D.		\$
E.		\$
F.		\$
G.		\$
H.		\$
I.		\$
J.		\$
K.		\$
L.		\$
M.		\$
N.		\$
O. Totals from attached sheets, if any <input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on other debts and enter the total.</i>		\$
Total other debts <i>Including amounts shown on attached sheets, if any.</i>		\$

Continued on next page

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

3. Income and Deductions

The deductions listed in section 3 are the deductions allowed by the Iowa Child Support Guidelines and are subtracted when determining net income.

A. Petitioner

(1) Income and Deductions *If you are Respondent, give your best estimate for each amount.*

**How often is income paid or deduction taken?*

W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

Current income and deductions for Petitioner <i>Sources of income and deductions, not including Social Security benefits</i>	Income		Deductions	
	How often paid? <i>W,B,M,T</i>	Gross amount <i>Before deductions</i>	How often taken? <i>W,B,M,T</i>	Amount of deduction
a. Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
b. Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
c. Unemployment assistance		\$		\$
d. Workers' compensation		\$		\$
e. Pension / Retirement		\$		\$
f. Veteran's benefits		\$		\$
g. Other <i>Identify:</i>		\$		\$
h. Other <i>Identify:</i>		\$		\$
i. Other <i>Identify:</i>		\$		\$
j. Mandatory pension contribution <i>List required contribution only (e.g. IPERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction.</i>				\$
k. Union Dues				\$
**l. Prior court-ordered child support <i>Paid to:</i>				\$
**m. Prior court-ordered medical support <i>Paid to:</i>				\$
**n. Prior court-ordered spousal support (alimony) <i>Paid to:</i>				\$
o. Totals from attached sheets, if any <input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on Petitioner's income and deductions.</i>		\$		\$
Totals <i>Current income and deductions for Petitioner</i>		\$ 0.00 <i>Income total</i>		\$ 0.00 <i>Deductions total</i>

****Under "Amount of deduction," list the amount of child support or spousal support actually paid under a prior court order (an order filed before this action). If child support payments were not made through the Child Support Recovery Unit, attach proof of payments for the past 12 months.**

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

(2) **Petitioner's other children with no court-ordered support, if any:** *If you are Respondent, provide as much information as you can.*

List the initials and birth year of each child for whom Petitioner is the legal parent.

Do not include any children involved in this case.

First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth year
i.		iv.	
ii.		v.	
iii.		vi.	

Check this box if you have attached a sheet listing additional children for whom Petitioner is the legal parent.

(3) **Petitioner's actual child care expenses due to employment, if any:**

For custodial parent only. If you are not the custodial parent, skip to (4).

\$ _____ per _____
Amount Frequency

(4) **Petitioner's income from Social Security benefits, if any:**

a. **Supplemental Security Income (SSI), if any:**

i. Supplemental Security Income (SSI) paid to Petitioner for disability: \$ _____ per month

ii. Supplemental Security Income (SSI) paid to children for their disability: \$ _____ per month

iii. List the children in Petitioner's home who receive SSI benefits *Use initials only:*

First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth year
(a)		(d)	
(b)		(e)	
(c)		(f)	

Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSI).

b. **Social Security Disability (SSD) or Social Security Retirement (SSR), if any:**

i. Benefit paid for Petitioner \$ _____ per month

ii. Benefit paid for each child in Petitioner's home \$ _____ per month

iii. Number of children receiving benefits _____ children

c. **Social Security Disability (SSD), if any:**

i. Paid to children for their disability: \$ _____ per month

ii. List the children in Petitioner's home who receive SSD benefits *Use initials only:*

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

First, middle, & last initials of each child	Birth year
(a)	
(b)	
(c)	

First, middle, & last initials of each child	Birth year
(d)	
(e)	
(f)	

Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSD).

B. Respondent

(1) Income and Deductions *If you are Petitioner, give your best estimate for each amount.*

**How often is income paid or deduction taken?*

W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

Current income and deductions for Respondent <i>Sources of income and deductions, not including Social Security benefits</i>	Income		Deductions	
	How often paid? <i>W,B,M,T</i>	Gross amount <i>Before deductions</i>	How often taken? <i>W,B,M,T</i>	Amount of deduction
a. Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
b. Wages from employer <i>Employer name:</i> <i>Job title:</i>		\$		\$
c. Unemployment assistance		\$		\$
d. Workers' compensation		\$		\$
e. Pension / Retirement		\$		\$
f. Veteran's benefits		\$		\$
g. Other <i>Identify:</i>		\$		\$
h. Other <i>Identify:</i>		\$		\$
i. Other <i>Identify:</i>		\$		\$
j. Mandatory pension contribution <i>List required contribution only (e.g. IPEERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction.</i>				\$
k. Union Dues				\$
**l. Prior court-ordered child support <i>Paid to:</i>				\$
**m. Prior court-ordered medical support <i>Paid to:</i>				\$
**n. Prior court-ordered spousal support (alimony) <i>Paid to:</i>				\$

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

o. Totals from attached sheets, if any <input type="checkbox"/> Check this box if you have attached a sheet with additional information on Respondent's income and deductions.		\$		\$
Totals <i>Current income and deductions for Respondent</i>		\$ 0.00 Income total		\$ 0.00 Deductions total

**Under "Amount of deduction," list the amount of child support or spousal support actually paid under a prior court order (an order filed before this action). If child support payments were not made through the Child Support Recovery Unit, attach proof of payments for the past 12 months.

(2) Respondent's other children with no court-ordered support, if any: *If you are Petitioner, provide as much information as you can.*

List the initials and birth year of each child for whom Respondent is the legal parent.
Do not include any children involved in this case.

First, middle, & last initials of each child	Birth year
i.	
ii.	
iii.	

First, middle, & last initials of each child	Birth year
iv.	
v.	
vi.	

Check this box if you have attached a sheet listing additional children for whom Respondent is the legal parent.

(3) Respondent's actual child care expenses due to employment, if any:

For custodial parent only. If you are not the custodial parent, skip to (4).

\$ _____ per _____
Amount Frequency

(4) Respondent's income from Social Security benefits, if any:

a. Supplemental Security Income (SSI), if any:

i. Supplemental Security Income (SSI) paid to Respondent for disability: \$ _____ per month

ii. Supplemental Security Income (SSI) paid to children for their disability: \$ _____ per month

iii. List the children in Respondent's home who receive SSI benefits *Use initials only.*

First, middle, & last initials of each child	Birth year
(a)	
(b)	
(c)	

First, middle, & last initials of each child	Birth year
(d)	
(e)	
(f)	

Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSI).

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

b. Social Security Disability (SSD) or Social Security Retirement (SSR), if any:

- i. Benefit paid for Respondent \$ _____ per month
- ii. Benefit paid for each child in Respondent's home \$ _____ per month
- iii. Number of children receiving benefits _____ children

c. Social Security Disability (SSD), if any:

- i. Paid to children for their disability: \$ _____ per month
- ii. List the children in Respondent's home who receive SSD benefits *Use initials only:*

First, middle, & last initials of each child	Birth year
(a)	
(b)	
(c)	

First, middle, & last initials of each child	Birth year
(d)	
(e)	
(f)	

Check this box if you have attached a sheet listing additional children who receive Supplemental Security Disability (SSD).

4. Costs for Health Insurance, Medical Support, and Dental Care

A. Costs for Petitioner *If you are Respondent, give your best estimate for each amount.*

(1) Petitioner has health insurance available through employer.

- a. True
- b. False

*If you check a, list the frequency and cost of health insurance paid.
If you check b, continue to (2).*

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Type of employer health insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single health insurance		\$
Family health insurance		\$

(2) Petitioner has health insurance through a source other than employer.

- a. True
- b. False

*If you check a, list the frequency and cost of health insurance paid.
If you check b, continue to (3).*

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

Type of other health insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single health insurance		\$
Family health insurance		\$

(3) Petitioner pays **medical support** for the child or children as required by court order.

- a. True
- b. False

If you check a, list the frequency and cost of medical support paid.

If you check b, continue to (4).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Medical support paid to	How often paid?*	Cost
	<i>W,B,M,T</i>	
		\$
		\$
		\$

(4) Petitioner has **dental insurance** available through employer.

- a. True
- b. False

If you check a, list the frequency and cost of dental insurance paid.

If you check b, continue to (5).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Type of employer dental insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single dental insurance		\$
Family dental insurance		\$

(5) Petitioner has **dental insurance** through a source other than employer.

- a. True
- b. False

If you check a, list the frequency of other dental insurance paid.

If you check b, continue to (6).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

Type of other dental insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single dental insurance		\$
Family dental insurance		\$

(6) Petitioner pays other medical expenses not covered by insurance.

- a. True
- b. False

If you check a, list the cost and frequency of other medical expenses paid that are not covered by insurance. Include all medical, dental, vision, etc. expenses as one lump sum.

If you check (6)b, continue to 4B, Costs for Respondent.

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

How often paid?*	Cost
<i>W,B,M,T</i>	
	\$
	\$

B. Costs for Respondent *If you are Petitioner, give your best estimate for each amount.*

(1) Respondent has health insurance available through employer.

- a. True
- b. False

If you check a, list the frequency and cost of health insurance paid.

If you check b, continue to (2).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Type of employer health insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single health insurance		\$
Family health insurance		\$

(2) Respondent has health insurance through a source other than employer.

- a. True
- b. False

If you check a, list the frequency and cost of health insurance paid.

If you check b, continue to (3).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

Type of other health insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single health insurance		\$
Family health insurance		\$

(3) Respondent pays medical support for the child or children as required by court order.

- a. True
- b. False

If you check a, list the frequency and cost of medical support paid.

If you check b, continue to (4).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Medical support paid to	How often paid?*	Cost
	<i>W,B,M,T</i>	
		\$
		\$
		\$

(4) Respondent has dental insurance available through employer.

- a. True
- b. False

If you check a, list the frequency and cost of dental insurance paid.

If you check b, continue to (5).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Type of employer dental insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single dental insurance		\$
Family dental insurance		\$

(5) Respondent has dental insurance through a source other than employer.

- a. True
- b. False

If you check a, list the frequency of other dental insurance paid.

If you check (5)b, continue to (6).

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

Type of other dental insurance	How often paid?*	Cost
	<i>W,B,M,T</i>	
Single dental insurance		\$
Family dental insurance		\$

(6) Respondent pays other medical expenses not covered by insurance.

- a. True
- b. False

If you check a, list the cost and frequency of other medical expenses paid that are not covered by insurance. Include all medical, dental, vision, etc. expenses as one lump sum.

If you check (6)b, continue to 5, Expenses.

**How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month*

How often paid?*	Cost
<i>W,B,M,T</i>	
	\$
	\$

5. Expenses

A. Living arrangements

Check one

- (1) My spouse and I live in the same home.
- (2) My spouse and I do not live in the same home.

B. My expenses

Note: You must complete this section if you or your spouse want spousal support (alimony).

**How often paid?: W = Weekly B = Bi-weekly (every other week) M = Monthly
T = Two times a month A = Annually*

Type of expense	Paid to	How often paid?*	Monthly payment
		<i>W,B,M,T,A</i>	
(1) House payment or rent			\$
(2) Food <i>At home & restaurants</i>			\$
(3) Transportation (<i>gas, bus fare</i>) <i>Not car loan payments – see (12).</i>			\$
(4) Clothing			\$
(5) Medical, dental <i>Not health insurance payments – see (10).</i>			\$

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

(6) Utilities (<i>gas, electric</i>)			\$
(7) Phone			\$
(8) Cable / satellite television / internet			\$
(9) Car insurance payment			\$
(10) Health insurance payment			\$
(11) Credit card payments			\$
(12) Car loan payments			\$
(13) Other loan payments			\$
(14) Other expense <i>Identify:</i>			\$
(15) Other expense <i>Identify:</i>			\$
(16) Other expense <i>Identify:</i>			\$
(17) Totals from attached sheets, if any <input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on your expenses.</i>			\$
Total expenses			\$ 0.00

Continued on next page

Rule 17.200—Form 224: *Financial Affidavit for a Dissolution of Marriage with Children*, continued

6. Attorney Help

Check one

A. An attorney did not help me prepare or fill in this paper.

B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

7. Certification of Service by Mailing or Delivery

Section 8 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Financial Affidavit to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

8. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Financial Affidavit and that the information I have provided in this Financial Affidavit is true and correct.

_____, 20____
Signed on: Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address – if available*

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 225: Affidavit of Mailing Notice

Petitioner: You **must** file this Affidavit if you served Notice by Publication in a newspaper and you ask the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Equity case no. _____

Petitioner *Full name: first, middle, last*

Affidavit of Mailing Notice

and concerning

Respondent *Full name: first, middle, last*

1. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

Petitioner's Oath and Signature on next page

Rule 17.200—Form 225: *Affidavit of Mailing Notice*, continued

2. Petitioner’s Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the laws of the State of Iowa that on the _____ day of _____, 20____, I sent by ordinary mail with proper postage, the following paper or papers:

Check one

- Original Notice and Petition for Dissolution of Marriage, or
- Notice of Intent to File a Written Application for Default Decree

to Respondent’s last-known address as follows:

Respondent’s street address *City* *State* *ZIP code*

_____, 20____
Signed on: Month *Day* *Year* *Petitioner’s signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address – if available*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 226: Notice of Intent to File Written Application for Default Decree

Petitioner: If Respondent has not filed an Answer or Motion within 20 days from the date of Service of the Original Notice or date of the Acceptance of Service, you may seek a Default Decree.

Before Petitioner asks the court for a Default Decree of Dissolution of Marriage, Petitioner must file this form (226).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Notice of Intent to File Written Application for Default Decree

To: _____
Respondent's first name Middle name Last name

Date of Notice: _____, 20____
Month Day Year

Important Notice to Respondent:

You are in default because you have failed to take action required of you in this case.
Unless you act within **10 days** from the date of this Notice, a Default Decree of Dissolution of Marriage will be entered against you without a hearing, and you may lose your property or other important rights.

You should seek legal advice at once.

Handwritten signature of Petitioner or attorney if filing in paper or */s/* _____
Electronic signature of Petitioner or Attorney if filing electronically

The person who provided the signature above must fill in the information below.

Present street address (If attorney, firm address) City State ZIP code

(_____) _____
Phone number Email address

Instructions for Petitioner

 **Filing your Notice electronically**

EDMS will automatically serve Respondent unless Respondent is exempt from electronic filing requirements.

 **Filing your Notice in paper** (if you have received permission from the court to file in paper)

1. Deliver a copy of this form to Respondent by mail or in person.
2. Complete form 225 and file the original at the clerk of court's office.
3. File the original of this form (226) at the clerk of court's office.
4. Keep a copy for your records.

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children

Use this form only if you have filed a Petition for Dissolution of Marriage (201) and:

- Your spouse (Respondent) did not file an Answer, or
- Your spouse will not work with you to prepare a Settlement Agreement (228).

Caution: This form may require you to provide protected or sensitive information.

 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.

 If filing in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Request for Relief in a Dissolution of Marriage with Children

1. Personal Information *Fill in all information that you know. If you have been assaulted by your spouse and you fear for your safety, you may leave your address, phone number, and email blank.*

I am

Check A or B and fill in C and D.

A. Petitioner

B. Respondent

C. Petitioner's birth year and present residence: _____
Birth year

Petitioner's present street address *City* *State* *ZIP code*

County *()* *Phone number* *Email address*

D. Respondent's birth year and present residence: _____
Birth year

Respondent's present street address *City* *State* *ZIP code*

County *()* *Phone number* *Email address*

Rule 17.200—Form 227: *Request for Relief in a Dissolution of Marriage with Children*, continued

2. Request for Relief

A. Children *Check all that are true*

- (1) Petitioner and Respondent agree to the custody and visitation set out in the Agreed Parenting Plan (229). *A parenting plan must be provided to the court with the Request for Relief.*
- (2) Petitioner and Respondent do not agree about custody and visitation. I filed a Proposed Parenting Plan (230). *A parenting plan must be provided to the court with the Request for Relief.*
- (3) Petitioner has taken the children in the middle course. *Attach certificate*
- (4) Respondent has taken the children in the middle course. *Attach certificate*

B. Breakdown of marriage

The marriage is broken down and cannot be saved.

C. Counseling

Counseling will not save the marriage.

D. Waiting period before decree *Check one*

- (1) More than 90 days have passed since Respondent accepted service or was served with an Original Notice.
- (2) Fewer than 90 days have passed since Respondent accepted service or was served with an Original Notice, but I want the court to take action right away without a separate hearing because:

This paper explains how I would like to settle all issues in my divorce.

E. Financial affidavits *Check one*

- (1) I filed a Financial Affidavit (224). I certify that I have fully disclosed all income and the identity and value of all assets and debts.
- (2) I am asking that the court not require me to file a Financial Affidavit because:

F. Child support *Check all that are true*

The amount of child support is determined using the Iowa Child Support Guidelines. The Iowa Department of Human Services provides a child support estimator on its website. Go to: <https://childsupport.ia.gov/>.

- (1) Petitioner shall pay child support to Respondent in the amount of \$ _____ per month.
- (2) Petitioner shall pay child support to a third party in the amount of \$ _____ per month.

Third party's full name: first, middle, last

Present street address

City

State

ZIP code

County

Rule 17.200—Form 227: *Request for Relief in a Dissolution of Marriage with Children*, continued

- (3) Respondent shall pay child support to Petitioner in the amount of \$ _____ per month.
- (4) Respondent shall pay child support to a third party in the amount of \$ _____ per month.

Third party's full name: first, middle, last

Present street address City State ZIP code

County

- (5) Child support payments shall begin on the _____ day of _____, 20____,

Month *Year*

for the following children:

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

Check this box if you are attaching a separate sheet listing additional children.

- (6) Check here if you want child support to be higher or lower than the Child Support Guidelines amount. *If you check (6), write the amount you want and explain why in b.*

a. Amount requested: \$ _____ per month

b. Child support should be different from the Guidelines amount because:

G. Tax exemption

- (1) I ask the court to set the tax deduction as follows:

Check one for each child

First, middle, & last initials of each child	Birth year	Parent who should now claim child for tax deduction	Every Year	Even Years	Odd Years
a.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Check this box if you are attaching a separate sheet listing additional children.

Rule 17.200—Form 227: *Request for Relief in a Dissolution of Marriage with Children*, continued

- (2) The deduction will start in tax year _____.
Year

Note: The parent with custody must sign IRS Form 8332 before the non-custodial parent can take the deduction. Tax forms are available from the IRS website: <http://www.irs.gov>.
The earned income tax credit is not the same as the tax exemption.

H. Health care expenses

I ask the court to set the health care expenses as follows: *Check all that apply*

Petitioner Respondent

- (1) will provide medical support (health insurance).
- (2) will pay the first \$ _____ of uncovered medical expenses for the children. After that amount is spent, then uncovered medical expenses shall be paid _____% by Petitioner and _____% by Respondent.
- (3) shall pay cash medical support in the amount of \$ _____ per month.

I. Division of Personal Property *Check one*

- (1) All of the personal property obtained during the marriage has been divided. I ask that Petitioner will keep the personal property in Petitioner's possession, and Respondent will keep the personal property in Respondent's possession. *If you check (1), skip to J.*
- (2) Our personal property has not been divided. I ask that our personal property be divided as follows:
- a. Petitioner will get the following as Petitioner's separate personal property:

- b. Respondent will get the following as Respondent's separate personal property:

Check this box if you attached a separate sheet listing additional information about personal property.

Note on retirement accounts and pensions: If the divorce Decree gives you or your spouse part of the other person's retirement account or pension, a separate order called a Qualified Domestic Relations Order (QDRO) must be entered. QDROs are complicated; you should ask an attorney for help with a QDRO.

J. Division of real estate

For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel.

- (1) Ownership of real estate
Check one
- a. We do not own any real estate. *If you check a, skip to K.*

Rule 17.200—Form 227: *Request for Relief in a Dissolution of Marriage with Children*, continued

- b. We own real estate located at: _____,
Street address
 in the City of _____, County of _____, and
 State of _____. This land is described in the deed or contract as follows:

(2) The real estate shall be:

Check one

- a. Sold and the profit or debt divided _____% to Petitioner and _____%
 to Respondent.
 b. Awarded to Petitioner, subject to all liens and mortgages.
 c. Awarded to Respondent, subject to all liens and mortgages.
 d. Other *Explain* _____

(3) Additional real estate

- Check this box if you are attaching separate sheets for additional parcels of real estate.*

Changing title to real estate is a complicated and important step in the divorce process.
 If you will be changing title to real estate, you should talk to an attorney.

K. Division of debts

Check one

- (1) There are no debts.
 (2) I have listed all the debts I know about and ask that they be divided as follows:
Attach additional sheets if necessary.

- a. Petitioner will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any <i>Last 4 numbers only</i>	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

- Check this box if you are attaching a separate sheet listing additional information about
 Petitioner's debts.*

Rule 17.200—Form 227: *Request for Relief in a Dissolution of Marriage with Children*, continued

b. Respondent will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any <i>Last 4 numbers only</i>	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.

c. For any debt we do not know about, the spouse who made the debt will pay that debt.

You may want to close any credit cards and joint bank accounts in the names of both spouses. Closing accounts may limit the funds a former spouse has access to and may limit your liability for your former spouse's debts.

L. Cash payment

I ask that

Check one

- (1) Neither Petitioner nor Respondent pay any money to the other.
- (2) Petitioner pay Respondent \$ _____ to equalize the division of property and debts by _____, 20____.
Month Day Year
- (3) Respondent pay Petitioner \$ _____ to equalize the division of property and debts by _____, 20____.
Month Day Year

M. Spousal support (alimony)

Check one

I ask that

- (1) Neither Petitioner nor Respondent pay spousal support (alimony) to the other.
- (2) Spousal support (alimony) be paid as follows: _____

N. Name change

Check one

I ask that my last name

- (1) Not be changed.
- (2) Be changed to: _____ *Name can only be changed to name on birth certificate or name used immediately prior to the marriage.*
Print your former or birth name

Rule 17.200—Form 227: *Request for Relief in a Dissolution of Marriage with Children*, continued

O. Court fees

Check one

I ask that

- (1) Petitioner will pay all court fees.
(2) Respondent will pay all court fees.
(3) Petitioner and Respondent shall each pay one-half of the remaining court fees.
(4) Petitioner and Respondent shall each pay one-half of the total court fees.

P. Attorney's fees

Check one

- (1) I have no attorney's fees.
(2) I will pay my own attorney's fees.
(3) I ask that my spouse pay me \$ _____ for attorney's fees.

Q. Necessary documents

I ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Decree.

R. Other request for relief _____

Check this box if you have attached a separate sheet listing additional requests for relief.

3. Statements of Understanding and Fact

Check all that apply

- A. I have made a full disclosure of my property and debts to the court.
B. This request for relief addresses all issues in my divorce.
C. I want the court to approve this request for relief and make it part of the final Decree.

Continued on next page

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

4. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

5. Certification of Service by Mailing or Delivery

Section 5 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Request to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

6. Oath and Signature

I, _____, have read this Request, and I certify under penalty
Print your name
of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Request is true and correct.

_____, 20____
Signed on: *Month* *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address, if applicable*

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.200—Form 228 Settlement Agreement for a Dissolution of Marriage with Children

Use this form only if you and your spouse both agree to the terms of a Settlement Agreement.

Do not use this form if:

- You and your spouse have no children under the age of 18.
- You and your spouse have no children 18 years of age or older who still need support.
- There are no children under age 18 who were adopted or born during this marriage.

Caution: This form may require you to provide protected or sensitive information.

-  If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
-  If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where your case is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Settlement Agreement for a Dissolution of Marriage with Children</p>
--	---

1. Personal Information *Fill in all information that you know. If you have been assaulted by your spouse and you fear for your safety, you may leave your address, phone number, and email blank.*

A. Petitioner's birth year and present residence: _____
Birth year

Petitioner's present street address _____
City _____
State _____
ZIP code

County _____
Phone number _____
Email address

B. Respondent's birth year and present residence: _____
Birth year

Respondent's present street address _____
City _____
State _____
ZIP code

County _____
Phone number _____
Email address

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

2. Agreements

We agree to the following:

A. Children *Check all that are true*

- (1) We agree to the custody and visitation set out in the Agreed Parenting Plan (229).
- (2) We do not agree about custody and visitation. We each filed a Proposed Parenting Plan (230). *A parenting plan, either form 229 or form 230, must be provided to the court with the Settlement Agreement.*
- (3) Petitioner has taken the children in the middle course. *Attach certificate.*
- (4) Respondent has taken the children in the middle course. *Attach certificate.*

B. Breakdown of marriage

The marriage is broken down and cannot be saved.

C. Counseling

Counseling will not save the marriage.

D. Waiting period before decree *Check all that apply*

- (1) More than 90 days have passed since Respondent accepted service or was served with an Original Notice.
- (2) Fewer than 90 days have passed since Respondent accepted service or was served with an Original Notice, but we want the court to take action right away without a separate hearing because:

This paper explains how we would like to settle all issues in our divorce.

E. Financial affidavits *Check one*

- (1) Petitioner or Respondent has filed a Financial Affidavit (224).
If you check (1), check each that is applicable.
- a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and debts.
- b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent has fully disclosed all income and the identity and value of all assets and debts.
- (2) We are asking that the court not require us to file Financial Affidavits because:

F. Child Support *Check all that are true*

Note: The amount of child support is determined using the Iowa Child Support Guidelines. The Iowa Department of Human Service provides a child support estimator on its website. Go to: <https://childsupport.ia.gov/>.

- (1) Petitioner shall pay child support to Respondent in the amount of \$ _____ per month.
- (2) Petitioner shall pay child support to a third party in the amount of \$ _____ per month.

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

Third party's full name: first, middle, last

Present street address *City* *State* *ZIP code*

County

- (3) Respondent shall pay child support to Petitioner in the amount of \$ _____ per month.
- (4) Respondent shall pay child support to a third party in the amount of \$ _____ per month.

Third party's full name: first, middle, last

Present street address *City* *State* *ZIP code*

County

- (5) Child support payments shall begin on the _____ day of _____, 20____,

Month *Year*

for the following children:

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

Check this box if you are attaching a separate sheet listing additional children.

- (6) Check here if you want child support to be higher or lower than the Child Support Guidelines amount. *If you check (6), write the amount you want and explain why in b.*
 - a. Amount requested: \$ _____ per month
 - b. Child support should be different from the Guidelines amount because:

G. Tax exemption

- (1) I ask the court to set the tax deduction as: *Check one for each child*

First, middle, & last initials of each child	Birth year	Parent who should now claim child for tax deduction	Every Year	Even Years	Odd Years
a.			○	○	○
b.			○	○	○
c.			○	○	○

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

d.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f.			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Check this box if you are attaching a separate sheet listing additional children.

Note: The parent with custody must sign IRS Form 8332 before the non-custodial parent can take the deduction. Tax forms are available from the IRS website: <http://www.irs.gov>. The earned income tax credit is not the same as the tax exemption.

(2) The deduction will start in tax year _____.
Year

H. Health care expenses

I ask the court to set the health care expenses as follows: *Check all that apply*

Petitioner Respondent

- (1) will provide medical support (health insurance).
- (2) will pay the first \$_____ of uncovered medical expenses for the children. After that amount is spent, then uncovered medical expenses shall be paid _____% by Petitioner and _____% by Respondent.
- (3) shall pay cash medical support in the amount of \$_____ per month.

I. Division of personal property

Check one

(1) We have divided our personal property. Petitioner will keep the personal property in Petitioner's possession. Respondent will keep the personal property in Respondent's possession.

If you check (1), skip to J.

(2) Our personal property has not been divided, but we agree it will be divided as follows: *Attach additional sheets if necessary.*

a. Petitioner will get the following as Petitioner's separate personal property:

b. Respondent will get the following as Respondent's separate personal property:

Note on retirement accounts and pensions: If the divorce Decree gives you or your spouse part of the other person's retirement account or pension, a separate order called a Qualified Domestic Relations Order (QDRO) must be entered. QDROs are complicated; you should ask an attorney for help with a QDRO.

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

J. Division of real estate

For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel.

(1) Ownership of real estate

Check one

- a. We do not own any real estate. *If you check a, skip to K.*
- b. We own real estate located at: _____,
Street address

in the City of _____, County of _____, and

State of _____. This land is described in the deed or contract as follows:

(2) The real estate shall be:

Check one

- a. Sold and the profit or debt divided _____% to Petitioner and _____% to Respondent.
- b. Awarded to Petitioner, subject to all liens and mortgages.
- c. Awarded to Respondent, subject to all liens and mortgages.
- d. Other *Explain* _____

(3) Additional real estate

Check this box if you are attaching separate sheets for additional parcels of real estate.

Note: Changing title to real estate is a complicated and important step in the divorce process. If you will be changing title to real estate, you should talk to an attorney.

K. Division of debts

Check all that apply

- (1) There are no debts.
- (2) We have listed all the debts that we know about and ask that they be divided as follows:
Attach additional sheets if necessary.

a. Petitioner will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any <i>Last 4 numbers only</i>	iii. Total amount still owed
(a)		\$
(b)		\$

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.

b. Respondent will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any <i>Last 4 numbers only</i>	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.

c. For any debt we do not know about, the spouse who made the debt will pay that debt.

Note: You may want to close any credit cards and joint bank accounts in the names of both spouses. Closing accounts may limit the funds a former spouse has access to and may limit your liability for your former spouse's debts.

L. Cash payment

We ask that

Check one

- (1) Neither Petitioner nor Respondent pay any money to the other.
- (2) Petitioner pay Respondent \$ _____ to equalize the division of property and debts by _____, 20____.
Month Day Year
- (3) Respondent pay Petitioner \$ _____ to equalize the division of property and debts by _____, 20____.
Month Day Year

Continued on next page

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

M. Spousal support (alimony)

Check one

We ask that:

- (1) Neither Petitioner nor Respondent pay spousal support (alimony) to the other.
- (2) Petitioner pay spousal support (alimony) to Respondent as follows:

- (3) Respondent pay spousal support (alimony) to Petitioner as follows:

N. Name change

Check one

We ask that

- (1) Petitioner's name

- a. Not be changed.
- b. Be changed to:

Print Petitioner's former or birth name

Name can only be changed to name on birth certificate or name used immediately prior to the marriage.

- (2) Respondent's name

- a. Not be changed.
- b. Be changed to:

Print Respondent's former or birth name

Name can only be changed to name on birth certificate or name used immediately prior to the marriage.

O. Court fees

Check one

We ask that

- (1) Petitioner will pay all court fees.
- (2) Respondent will pay all court fees.
- (3) Petitioner and Respondent shall each pay one-half of the remaining court fees.
- (4) Petitioner and Respondent shall each pay one-half of the total court fees.

P. Attorney's fees

- (1) Petitioner's attorney's fees

Check one

- a. Petitioner has no attorney's fees.
- b. Petitioner will pay Petitioner's attorney's fees.
- c. Respondent will pay \$ _____ for Petitioner's attorney's fees.

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

(2) Respondent's attorney's fees

Check one

- a. Respondent has no attorney's fees.
- b. Respondent will pay Respondent's attorney's fees.
- c. Petitioner will pay \$ _____ for Respondent's attorney's fees.

Q. Necessary documents

We will sign and promptly deliver to each other any papers that may be needed to carry out this Settlement Agreement.

R. Other agreements

Attach additional sheets if necessary.

Continued on next page

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

3. Attorney Help

Check one

A. Petitioner

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.

If you check (2), you must fill in the following information:

<i>Name of attorney or organization, if any</i>	<i>Attorney's P.I.N. # – Ask the attorney</i>
<i>Business address of attorney or organization</i>	<i>City</i>
<i>State</i>	<i>ZIP code</i>
() _____	() _____
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>
<i>Attorney's email address – optional</i>	

B. Respondent

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.

If you check (2), you must fill in the following information:

<i>Name of attorney or organization, if any</i>	<i>Attorney's P.I.N. # – Ask the attorney</i>
<i>Business address of attorney or organization</i>	<i>City</i>
<i>State</i>	<i>ZIP code</i>
() _____	() _____
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>
<i>Attorney's email address – optional</i>	

4. Oaths and Signatures

This Settlement Agreement addresses all issues in our divorce. We have made a full disclosure of our property and debts to each other. We want the court to approve this Agreement and make it a part of the final Decree.

A. Petitioner's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court.

<i>Month</i>	<i>Day</i>	20	<i>Year</i>	<i>Petitioner's signature*</i>
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<i>Mailing address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>
------------------------	-------------	--------------	-----------------

() _____	_____	_____
<i>Phone number</i>	<i>Email address</i>	<i>Additional email address – if available</i>

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Continued on next page

Rule 17.200—Form 228: *Settlement Agreement for a Dissolution of Marriage with Children*, continued

B. Respondent's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court.

_____, 20_____
*Month Day Year Respondent's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address - if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 229: *Agreed Parenting Plan*

Use **this form** if both spouses agree to everything in the plan regarding child custody and visitation.

Do not use this form if you and your spouse **do not** agree to all child custody and visitation arrangements. Instead, use form 230 to present a Proposed Parenting Plan to the court for the child custody and visitation arrangements you want.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where you are filing this Parenting Plan

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name: first, middle, last</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name: first, middle, last</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Agreed Parenting Plan</p>
--	--

1. Information for the Court

A. The parties agree to this plan.

B. Children *List all children born to or adopted by Petitioner and Respondent.*

First, middle, & last initials of each child	Present age	Gender		School	Grade
		M	F		
(1)		<input type="radio"/>	<input type="radio"/>		
(2)		<input type="radio"/>	<input type="radio"/>		
(3)		<input type="radio"/>	<input type="radio"/>		
(4)		<input type="radio"/>	<input type="radio"/>		
(5)		<input type="radio"/>	<input type="radio"/>		
(6)		<input type="radio"/>	<input type="radio"/>		

Check this box if you are attaching a sheet listing additional children.

C. Information about the children

Check all that are true

- (1) The children listed in B are the only children born to or adopted by these parents.
- (2) One or more of the children is in a juvenile court case. *If you check (2), attach a copy of the order that allows the district court to order child custody and visitation.*

Continued on next page

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

- (3) There are children of Petitioner or Respondent not listed in B. *Explain*
- *If there are children born before the marriage, who are not the children of Petitioner or of Respondent, check (3) and explain.*
 - *If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.*

2. Plan

A. Read these definitions of legal custody and physical care:

- (1) **Legal custody** means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (2) **Joint legal custody** means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (3) **Physical care** means providing the main home for the child and taking care of the child.
- (4) **Joint physical care** means both parents have equal rights and responsibilities for providing the main home for the child and taking care of the child.

B. Legal custody should be

Check one

- (1) Joint legal custody to both parents
- (2) To Petitioner
- (3) To Respondent
- (4) To other person _____
Full name of other person: first, middle, last

C. Physical care should be

Check one

- (1) To Petitioner *If you check (1), use D for Respondent's visitation.*
- (2) To Respondent *If you check (2), use D for Petitioner's visitation.*
- (3) Joint physical care to both parents *If you check (3), use D(12) to explain the joint physical care schedule.*
- (4) To other person _____
Full name of other person: first, middle, last

D. Visitation

Use D only if one parent will have physical care. This is the schedule for the other parent to see the children.

- (1) Visitation for
- Check one*
- a. Petitioner
- b. Respondent

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

(2) Visitation permission

Check a, b, or c.

a. Visitation should not be allowed because:

b. Visitation should be supervised because:

The supervisor for visitation should be _____
Supervisor's full name: first, middle, last

c. Regular unsupervised visitation schedule as the parents agree:

Check all that apply

i. Reasonable visitation as the parents agree.

ii. Mid-week visitation on these days:

M Tu W Th F From _____ a.m. to _____ a.m.
 p.m. p.m.

iii. Every weekend
From _____ at _____ a.m. to _____ at _____ a.m.
Day of week Time p.m. Day of week Time p.m.

iv. Every other weekend
From _____ at _____ a.m. to _____ at _____ a.m.
Day of week Time p.m. Day of week Time p.m.

v. Other *Describe*

vi. Visitation will start on _____, 20____
Month Day Year

(3) Detailed holiday schedule

This schedule tells on which holidays the children will be with either Petitioner or Respondent.

Note: You do not have to fill in everything. Any day that is left blank means the children will spend that day with the parent who already has the children on that day.

P = Petitioner R = Respondent

Holiday	Time	Every year		Even years		Odd years	
		P	R	P	R	P	R
New Year's Eve	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="checkbox"/>					
New Year's Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="checkbox"/>					
Martin Luther King, Jr. Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="checkbox"/>					

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

President's Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Memorial Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Independence Day <i>July 4th</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Labor Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Veterans' Day <i>November 11th</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Thanksgiving Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Christmas Eve	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Christmas Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Mother's Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Father's Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Petitioner's Birthday	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Respondent's Birthday	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Halloween <i>October 31st</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Other: <i>Describe</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				
Other: <i>Describe</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>				

(4) Special rules for holidays

Check one

- a. If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend.
- b. If a holiday falls on a Monday or a Friday, the alternating weekend schedule in D(2)c.iv. will continue. *This means the parent who has the children on the holiday weekend may have the children two weekends in a row.*
- c. The parents will cooperate and rearrange the alternate weekend schedule so that neither parent will have the children more weekends in a row without contact with the other parent.
- d.

Continued on next page

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

(5) Summer

Check one

- a. Summer school vacation will be divided as Petitioner and Respondent agree.
- b. Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts.
- c. The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.
- d. Other *Explain* _____

(6) Winter school holiday

Check one

- a. Winter school holidays will be divided as Petitioner and Respondent agree.
- b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year.
- c. Other *Explain* _____

(7) Spring school break

Check one

- a. Spring school break will be divided as Petitioner and Respondent agree.
- b. Spring school break will be alternated every other year between Petitioner and Respondent.
- c. Petitioner and Respondent will each have one-half of each spring school break.
- d. Other *Explain* _____

(8) The children's birthdays

Check one

- a. Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
- b. A child's birthday will be spent with the parent who has the child on that day.
- c. Each child's birthday will be alternated from year to year between Petitioner and Respondent.
- d. Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
- e. Other *Explain* _____

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

(9) Pick up and drop off

Check all that apply

- a. The parents will agree about pick up and drop off for each visit.
- b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation.
- c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, only the following persons are permitted to help: _____
- d. Other arrangements for visitation *For example, Petitioner and Respondent will meet at a location between their residences. Explain* _____

(10) The parent without the children may contact the children by

Check all that apply

- a. Calling the children

Check one

- i. At reasonable hours
- ii. Any day from _____ 8 a.m. to _____ 8 a.m.
 _____ 8 p.m. to _____ 8 p.m.
 Phone number (_____) _____
Phone number where children can be contacted

- b. Emailing the children at this address: _____
Email where children can be contacted
- c. Other *Explain* _____

(11) Changes to the schedule

Check all that apply

- a. The parties may agree to additional visitation or changes to the schedule.
- b. If one parent fails to arrive at the appointed time, then the other parent will wait for at least _____ minutes before cancelling the visit.
- c. No changes allowed except by a court order.
- d. Other *Explain* _____

Continued on next page

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

(12) Joint physical care plan

Use only if both Petitioner and Respondent are given joint physical care.

- a. How Petitioner and Respondent will make decisions about the children: *For example, decisions on school, medical care, religion, and other decisions parents make for their children.*

- b. How the children's time will be divided between Petitioner and Respondent: *You may use sections 3, 4, 5, 6, 7, and 8 for holidays, school breaks, and birthdays.*

- c. How the children's expenses will be paid: *For example, expenses such as clothes, activities, and school fees.* _____

- d. How Petitioner and Respondent will deal with major changes or disagreements about the children (including changes due to the children's age and development):

- e. Other issues:

(13) Resolving disagreements

Check one

Before going to court to resolve disagreements, Petitioner and Respondent will

- a. Ask the following person to help them resolve disagreements:

		(____)	
<i>Name</i>	<i>Relationship to parties</i>		<i>Phone number</i>
<i>Present street address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>

- b. Go to mediation. *Do not check if mediation will not work because of domestic violence or an injunction.*

Continued on next page

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

3. Attorney Help

Check one

A. Petitioner

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.

If you check (2), you must fill in the following information:

Name of attorney or organization, if any	Attorney's P.I.N. # – Ask the attorney		
Business address of attorney or organization	City	State	ZIP code
()	()		
Attorney's phone number	Attorney's fax number – optional	Attorney's email address – optional	

B. Respondent

- (1) An attorney did not help me prepare or fill in this paper.
- (2) An attorney helped me prepare or fill in this paper.

If you check (2), you must fill in the following information:

Name of attorney or organization, if any	Attorney's P.I.N. # – Ask the attorney		
Business address of attorney or organization	City	State	ZIP code
()	()		
Attorney's phone number	Attorney's fax number – optional	Attorney's email address – optional	

4. Oaths and Signatures

This Agreed Parenting Plan addresses all custody and visitation issues in our divorce. We want the court to approve this Agreed Parenting Plan and make it a part of the final Decree.

A. Petitioner's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print Petitioner's name

laws of the State of Iowa that I have read this Agreed Parenting Plan, and I agree with the Plan. I ask the court to adopt this Agreed Parenting Plan.

Month	Day	20	Year	Petitioner's signature*
-------	-----	----	------	-------------------------

Mailing address	City	State	ZIP code
-----------------	------	-------	----------

()		
Phone number	Email address	Additional email address – if available

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Continued on next page

Rule 17.200—Form 229: *Agreed Parenting Plan*, continued

B. Respondent's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print Respondent's name

laws of the State of Iowa that I have read this Agreed Parenting Plan, and I agree with the Plan. I ask the court to adopt this Agreed Parenting Plan.

_____, 20_____
*Month Day Year Respondent's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address - if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.200—Form 230: Proposed Parenting Plan

Use this form if you and your spouse do not agree to all child custody and visitation arrangements

Do not use this form if both spouses agree to everything in this plan. Instead, use form 229 to tell the court what you both want your plan to be.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where you are filing this Parenting Plan

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Proposed Parenting Plan

I am

Check one

- A. Petitioner
- B. Respondent

1. Information for the Court

A. **Children** *List all children born to or adopted by Petitioner and Respondent.*

First, middle, & last initials of each child	Present age	Gender		School	Grade
		M	F		
(1)		<input type="radio"/>	<input type="radio"/>		
(2)		<input type="radio"/>	<input type="radio"/>		
(3)		<input type="radio"/>	<input type="radio"/>		
(4)		<input type="radio"/>	<input type="radio"/>		
(5)		<input type="radio"/>	<input type="radio"/>		
(6)		<input type="radio"/>	<input type="radio"/>		

Check this box if you are attaching a separate sheet listing additional children.

B. Information about the children

- (1) The children listed in A are the only children born to or adopted by these parents.
- (2) One or more of the children is in a juvenile court case. *If you check (2), attach a copy of the order that allows the district court to order child custody and visitation.*
- (3) There are children of Petitioner or Respondent not listed in B. *Explain*
 - *If there are children born before the marriage, who are not the children of Petitioner or of Respondent, check (3) and explain.*

Rule 17.200—Form 230: *Proposed Parenting Plan*, continued

- *If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.*

C. Special concerns about the children

Check all that are true

- (1) Breastfeeding infant
 (2) Child with a disability
 (3) Other *Explain* _____

D. Information about the parents

Check all that are true

- (1) Petitioner receives public assistance, Title XIX, or FIP.
 (2) Respondent receives public assistance, Title XIX, or FIP.
 (3) Petitioner plans to move within the next year.
 (4) Respondent plans to move within the next year.
 (5) This is the Parenting Plan for before the move.
 (6) This is the Parenting Plan for after the move.

E. Special concerns about the parents

Check all that are true

- (1) Petitioner has an alcohol or drug problem.
 (2) Respondent has an alcohol or drug problem.
 (3) Petitioner does not have a driver's license.
 (4) Respondent does not have a driver's license.
 (5) Petitioner's home environment is not suitable. *Explain in 11.*
 (6) Respondent's home environment is not suitable. *Explain in 11.*
 (7) Petitioner is in jail or a mental health institution. *Explain in 11.*
 (8) Respondent is in jail or a mental health institution. *Explain in 11.*
 (9) Petitioner is protected under a Domestic Abuse Protective Order. *Explain in 11.*
 (10) Respondent is protected under a Domestic Abuse Protective Order. *Explain in 11.*
 (11) *Explain:* _____

Rule 17.200—Form 230: *Proposed Parenting Plan*, continued

2. Plan

A. Read these definitions of legal custody and physical care:

- (1) **Legal custody** means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (2) **Joint legal custody** means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (3) **Physical care** means providing the main home for the child and taking care of the child.
- (4) **Joint physical care** means both parents have equal rights and responsibilities for providing the main home for the child and taking care of the child.

B. Legal custody should be

Check one

- (1) Joint legal custody to both parents
- (2) To Petitioner
- (3) To Respondent
- (4) To other person _____
Full name of other person: first, middle, last

C. Physical care should be

Check one

- (1) To Petitioner *If you check (1), use D for Respondent's visitation.*
- (2) To Respondent *If you check (2), use D for Petitioner's visitation.*
- (3) Joint physical care to both parents *If you check (3), use D(12) to explain the joint physical care schedule.*
- (4) To other person _____
Full name of other person: first, middle, last

D. Visitation

Use D only if one parent will have physical care. This is the schedule for the other parent to see the children.

(1) Visitation for

Check one

- a. Petitioner
- b. Respondent

(2) Visitation permission

Check a, b, or c.

- a. Visitation should not be allowed because:

- b. Visitation should be supervised because:

Rule 17.200—Form 230: *Proposed Parenting Plan*, continued

The supervisor for visitation should be _____
Supervisor's full name: first, middle last

c. Regular unsupervised visitation schedule as the parents agree:

Check all that apply

i. Reasonable visitation as the parents agree.

ii. Mid-week visitation on these days:

M Tu W Th F From _____ a.m. to _____ p.m.

iii. Every weekend a.m. a.m.
 From _____ at _____ p.m. to _____ at _____ p.m.
Day of week Time Day of week Time

iv. Every other weekend a.m. a.m.
 From _____ at _____ p.m. to _____ at _____ p.m.
Day of week Time Day of week Time

v. Other *Describe*

vi. Visitation will start on _____, 20____
Month Day Year

(3) Detailed holiday schedule

This schedule tells on which holidays the children will be with either Petitioner or Respondent.

You do not have to fill in everything. Any day that is left blank means the children will spend that day with the parent who already has the children on that day.

P = Petitioner R = Respondent

Holiday	Time	Every year		Even years		Odd years	
		P	R	P	R	P	R
New Year's Eve	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
New Year's Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Martin Luther King, Jr. Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
President's Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Memorial Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Independence Day <i>July 4th</i>	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Labor Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Veterans' Day <i>November 11th</i>	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Thanksgiving Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Christmas Eve	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					
Christmas Day	: <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/>					

Rule 17.200—Form 230: *Proposed Parenting Plan*, continued

Mother's Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
Father's Day	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
Petitioner's Birthday	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
Respondent's Birthday	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
Halloween <i>October 31st</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
Other: <i>Describe</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>
Other: <i>Describe</i>	:	<input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/>

(4) Special rules for holidays

Check one

- a. If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend.
- b. If a holiday falls on a Monday or a Friday, the alternating weekend schedule in 3.a.iii. will continue.
- c. If a holiday falls on a Monday or a Friday, the alternating weekend schedule in D(2)c.iv. will continue. *This means the parent who has the children on the holiday weekend may have the children two weekends in a row.*
- d. Other *Explain* _____

(5) Summer

Check one

- a. Summer school vacation will be divided as Petitioner and Respondent agree.
- b. Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts.
- c. The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.
- d. Other *Explain* _____

Continued on next page

Rule 17.200—Form 230: *Proposed Parenting Plan*, continued

(6) Winter school holiday

Check one

- a. Winter school holidays will be divided as Petitioner and Respondent agree.
- b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year.
- c. Other *Explain* _____

(7) Spring school break

Check one

- a. Spring school break will be divided as Petitioner and Respondent agree.
- b. Spring school break will be alternated every other year between Petitioner and Respondent.
- c. Petitioner and Respondent will each have one-half of each spring school break.
- d. Other *Explain* _____

(8) The children's birthdays

Check one

- a. Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
- b. A child's birthday will be spent with the parent who has the child on that day.
- c. Each child's birthday will be alternated from year to year between Petitioner and Respondent.
- d. Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
- e. Other *Explain* _____

(9) Pick up and drop off

Check all that apply

- a. The parents will agree about pick up and drop off for each visit.
- b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation.
- c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, only the following people are permitted to help: _____

Rule 17.200—Form 230: *Proposed Parenting Plan*, continued

- d. Other arrangements for visitation (for example, Petitioner and Respondent will meet at a location between their residences): *Explain* _____

(10) The parent without the children may contact the children by

Check all that apply

- a. Calling the children

Check one

- i. At reasonable hours
- ii. Any day from _____ a.m. _____ a.m.
 p.m. to _____ p.m.

Phone number (_____) _____
Phone number where children can be contacted

- b. Emailing the children at this address: _____
Email where children can be contacted

- c. Other *Explain* _____

(11) Changes to the schedule

Check all that apply

- a. The parties may agree to additional visitation or changes to the schedule.
- b. If one parent fails to arrive at the appointed time, then the other parent will wait for at least _____ minutes before cancelling the visit.
- c. No changes allowed except by a court order.
- d. Other *Explain* _____

(12) Joint physical care plan

Use only if both Petitioner and Respondent are given joint physical care.

- a. How Petitioner and Respondent will make decisions about the children: *For example, decisions on school, medical care, religion, and other decisions parents make for their children.*

- b. How the children's time will be divided between Petitioner and Respondent: *You may use sections 3, 4, 5, 6, 7, and 8 for holidays, school breaks, and birthdays.*

Rule 17.200—Form 230: *Proposed Parenting Plan*, continued

3. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

4. Certification of Service by Mailing or Delivery

Section 4 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Proposed Parenting Plan to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

5. Oath and Signature

This Proposed Parenting Plan addresses all custody and visitation issues in our divorce. I want the court to approve this Proposed Parenting Plan and make it a part of the final Decree.

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Proposed Parenting Plan, and I agree with the Plan and the information. I ask the court to adopt this Proposed Parenting Plan.

_____, 20____
Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address – if available*

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rules 17.201 to 17.299 Reserved.

Rule 17.300 Forms for modifying child support. The following forms are for use in actions to modify a current child support order from an Iowa court.

Form 301:	Application to Modify Child Support
Form 302:	Cover Sheet for an Application to Modify Child Support
Form 303:	Confidential Information Form
Form 304:	Original Notice for Personal Service
Form 304a:	Original Notice for Personal Service
Form 305:	Acceptance of Service
Form 306:	Directions for Service of Original Notice
Forms 307 and 308:	Reserved
Form 309:	Application and Affidavit to Defer Payment of Costs
Form 310:	Affidavit of Service of Original Notice and Application to Modify Child Support
Form 311:	Protected Information Disclosure
Forms 312 to 314:	Reserved
Form 315:	Answer to Application to Modify Child Support
Form 316:	General Answer to Application to Modify Child Support
Forms 317 to 321:	Reserved
Form 322:	Motion in a Child Support Modification
Form 323:	Response to a Motion in a Child Support Modification
Form 324:	Child Support Modification Financial Statement
Form 325:	Affidavit of Mailing Notice
Form 326:	Notice of Intent to File Written Application for Default Decree
Form 327:	Request for Relief in a Child Support Modification
Form 328:	Settlement Agreement on an Application to Modify Child Support

[Court Order December 19, 2013; March 6, 2014]

Rule 17.300—Form 301: Application to Modify Child Support

Read the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* on the Iowa Judicial Branch website before using this form.

- You cannot use this form to change child custody, physical care, or visitation arrangements.
- You cannot use this form if there is no current Iowa court order or decree setting child support.
- Use this form only if you want to increase, decrease, or stop child support.
- "Applicant" is the person who files the first paper (an Application) to start a case to modify (change) child support. Applicant could have been either Petitioner or Respondent in the original case.

 If filing electronically, you must provide any protected information in full on form 311.

 If filing in paper, you may use form 311 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County of current child support order

Upon the Petition of

Petitioner
Full name of Petitioner as it is in the original case

Equity case no. _____
(As stated in the current support order)

Application to Modify Child Support

and concerning

Respondent
Full name of Respondent as it is in the original case

1. Personal Information *Fill in all information that you know. If you have been assaulted by your spouse and fear for your safety, you may leave your street address, phone number, and email blank.*

A. Applicant's (the party seeking to modify child support) information:

Full name: first, middle, last _____
Birth year

Applicant's present street address _____
City _____
State _____
ZIP code

County (_____) _____
Phone number _____
Email address

B. Other parent's information:

Full name: first, middle, last _____
Birth year

Other parent's present street address _____
City _____
State _____
ZIP code

County (_____) _____
Phone number _____
Email address

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.** Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.300—Form 301: *Application to Modify Child Support*, continued

C. Other person (non-parent) who receives child support *Check one*

- (1) There is no other person (non-parent) who receives child support in this case.
- (2) There is another person (non-parent) who receives child support in this case.

If someone other than a parent gets child support in this case, check box (2) and fill in below the person's name, year of birth, present residence, and contact information.

<i>Full name: first, middle, last</i>		<i>Birth year</i>	
<i>Present street address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>
<i>County</i>	() <i>Phone number</i>	<i>Email address</i>	

2. General Information about this Case

A. Current child support order

- (1) Date the current child support order was entered: _____, 20____
Month *Day* *Year*
- (2) County and state where the order was entered: _____
County *State*
- (3) Case number on the current child support order: _____
Case number
- (4) Person who pays child support in this case: _____
Name: first, last
- (5) Person who receives child support in this case: _____
Name: first, last
- (6) Current amount of child support paid: \$ _____ per _____
Amount *Frequency*

B. Copy of current child support order *Check one*

- (1) A copy of the current child support order is attached.
- (2) A copy of the current child support order is not attached.

C. Child Support Recovery Unit (CSRU) *Check one*

- (1) The Child Support Recovery Unit (CSRU) is involved in this case. *If CSRU is involved in this case, see the Important Notice to Applicant on page six of this form.*
- (2) The Child Support Recovery Unit (CSRU) is not involved in this case.

D. Collection Services Center (CSC) *Check one*

- (1) The Collection Services Center (CSC) is involved in this case.
The CSC number is: _____
- (2) The Collection Services Center (CSC) is not involved in this case.

Rule 17.300—Form 301: *Application to Modify Child Support*, continued

E. Other child support orders *Check one*

- (1) There are no other child support orders for the child or children involved in this case.
- (2) There are other child support orders for the child or children involved in this case.

They are:

<i>Case Number</i>	<i>County</i>	<i>State</i>
--------------------	---------------	--------------

<i>Case Number</i>	<i>County</i>	<i>State</i>
--------------------	---------------	--------------

Check this box if you are attaching a separate sheet listing additional child support orders.

F. The following children are covered by the current child support order:

First, middle, & last initials of each child	Birth year
(1)	
(2)	
(3)	

First, middle, & last initials of each child	Birth year
(4)	
(5)	
(6)	

Check this box if you have attached a separate sheet listing additional children.

G. The child support amount should be changed because *Check all that are true*

- (1) There is a juvenile court order that changed where the child or children are living. The person paying support has custody of the children.
If you check (1), write the county where the juvenile court order was entered and the case number.

_____ *County*

_____ *Case Number*

- (2) One or more of the children live with the parent who is paying support. There is no court order that sets up custody.
- (3) One or more of the children no longer qualify for child support.
- (4) My (Applicant's) income has gone down.
- (5) Respondent's (other parent's) income has gone up.
- (6) Other reason *Explain*

H. Child support amount should be *Check all that apply*

- (1) Raised *Explain* _____
- (2) Lowered *Explain* _____
- (3) Stopped *Explain* _____

Rule 17.300—Form 301: *Application to Modify Child Support*, continued

I. Tax deduction for the children

Check (1) or (2)

- (1) There is no court order at this time on tax deductions for the children.
- (2) There is a court order at this time on tax deductions for the children.

If you check (2), check a or b:

- a. A court order currently says who gets the tax deduction for the child or children and it should stay the same.
- b. A court order currently says who gets the tax deduction for the child or children and it should be changed. *Explain*

J. Health care expenses for the children

Check (1) or (2)

- (1) There is no court order at this time on who pays health care expenses.
- (2) There is a court order at this time on who pays health care expenses.

If you check (2), check a or b:

- a. A court order currently says who pays for health care expenses for the child or children and it should stay the same.
- b. A court order currently says who pays for health care expenses and it should be changed. *Explain*

K. The other party is

Check each that is true

- (1) In the military service
- (2) In prison or jail at _____ in _____.

Name of facility

State

L. Protective or no contact order

Check (1) or (2)

- (1) There is no "protective order" or "no-contact order" between any of the parties and me (Applicant).
- (2) There is a "protective order" or "no-contact order."

If you check (2), fill in the following information:

- a. County and state where the order came from: _____ *County* _____ *State*
- b. Court case number: _____

Rule 17.300—Form 301: *Application to Modify Child Support*, continued

M. Other information: _____

3. Applicant's Request

A. Applicant asks the court to:

Check all that apply. The court will only consider items that are checked.

- (1) Raise the current child support payment.
- (2) Lower the current child support payment.
- (3) End the current child support payment.
- (4) Set child support for the parent who does not have the children.
- (5) Change who gets the tax deduction for the child or children.
- (6) Change who pays for health care expenses for the child or children.
- (7) Order that the other party pay the court fees.
- (8) Order that the other party pay my attorney fees.
- (9) Other request: _____

Continued on next page

Rule 17.300—Form 301: *Application to Modify Child Support*, continued

4. Attorney Help

Check one

A. An attorney did not help me prepare or fill in this paper.

B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

5. Service Instructions if Filing in Paper

Check A or B only if Applicant is filing in paper, not electronically

A. Applicant will accept service of documents at the attorney's address listed above; or

B. Applicant will accept service of documents in this case at the mailing address below.

6. Oath and Signature

I, _____, have read this Application, and I certify under penalty
Print your name

of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Application is true and correct.

_____, 20_____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address, if applicable*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Important Notice to Applicant

- See next page for instructions for filing an Application.
- You must serve this Application and an Original Notice on the other parties.
- If the Child Support Recovery Unit (CSRU) is involved in this case, you must also serve both forms on CSRU.
- See the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* for information on serving papers.

Instructions for Rule 17.300—Form 301: *Application to Modify Child Support*, continued

Do not file these instructions

Instructions for Filing an Application to Modify Child Support

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically**, even if your original case was in paper, unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Application electronically

- If you are filing your Application in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide [How to Register Pro Se \(Self Represented\) for eFiling](#).
- After you have registered, [log in to the electronic filing system](#) to electronically file your Application.
- For help electronically filing your Application, see [How to eFile a New Case](#).
- With your Application, you must also file an Original Notice (304) and a Protected Information Disclosure (311).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Application and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your filing. For help, see [How to Resubmit a Returned Filing](#).
- Log in to your eFile account and download and print your Application and Original Notice so that you can serve it on (deliver it to) the other party.
- For help finding and downloading your Application and Original Notice, please see [My Filings Reference Guide](#).

Filing your Application in paper

- If the county where you will be filing your Application does not yet accept electronic filing, you must proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless you have received permission from the court to file in paper.
- With your Application (301), you must also file an Application Cover Sheet (302), an Original Notice (304a), and a Confidential Information Form (303).
- Forms 301 and 304a: Make **two** photocopies if you can deliver copies of these forms to the other party in-person or by mail. Make **three** photocopies if you are going to ask the county sheriff or a civil process server to deliver these forms to the other party.
Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.
- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you must also provide each form you file to the CSRU office that serves the county where your child support case is filed.
- Forms 302 and 303: You do **not** have to make photocopies of these forms.

Instructions for Rule 17.300—Form 301: *Application to Modify Child Support*, continued

- Take the original forms you filled in and the photocopies to the clerk of court office in your county. Tell the clerk at the counter you are filing an Application to Modify Child Support.
- Give the clerk at the counter these forms:
 - 301 Application to Modify Child Support
 - 302 Coversheet for an Application to Modify Child Support
 - 303 Confidential Information Form (*Do not make copies of this form.*)
 - 304a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 309.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (304a). You will have to serve this form on (deliver it to) the other party.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.300—Form 303: Confidential Information Form

 **This form is to be used by paper filers only.**

Each party must complete one of these forms if filing in paper.

Iowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

Upon the Petition of

Equity case no. _____

Petitioner

Full name of Petitioner as it is in the Application

Confidential Information Form

and concerning

Respondent

Full name of Respondent as it is in the Application

1. Applicant's Information

Full name: First, Middle, Last ____/____/____
Birth date ____-____-____
Social Security number

2. Other Party's Information

Full name: First, Middle, Last ____/____/____
Birth date ____-____-____
Social Security number

3. Children's Information

A. Child 1:

Full name: First, Middle, Last ____/____/____
Birth date ____-____-____
Social Security number

B. Child 2:

Full name: First, Middle, Last ____/____/____
Birth date ____-____-____
Social Security number

C. Child 3:

Full name: First, Middle, Last ____/____/____
Birth date ____-____-____
Social Security number

D. Child 4:

Full name: First, Middle, Last ____/____/____
Birth date ____-____-____
Social Security number

Continued on next page

Rule 17.300—Form 303 *Confidential Information Form*, continued

E. Child 5:

_____ / ____ / _____ _____ - ____ - _____
Full name: First, Middle, Last Birth date Social Security number

Check this box if you have attached a separate sheet listing additional children.

4. Signature of Provider of Information

The party or parties submit this information in compliance with the court's Order and with the knowledge the information will be used to enforce any support order under the Code of Iowa, chapters 234, 252A, 252C, 252F, 252H, 252K, or 600B, as provided for in section 598. If a party's address or employment changes, the party must promptly file an update of this information with the clerk of court or the Child Support Recovery Unit.

Information provided by: _____
Print your full name: first, middle, last

_____, 20____
Your signature Month Day Year

Important Notice

Do not give copies of this form to anyone except the clerk of court.

Rule 17.300—Form 304: Original Notice for Personal Service

Applicant must serve the Application on the other party within 90 days after filing the Application. Failure to meet this deadline may result in the court dismissing the Application.

Read the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* on the Iowa Judicial Branch website for additional important instructions.

-  If filing electronically, **Applicant must complete this form.**
-  If filing in paper, **Applicant must use form 304a.**

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

Upon the Petition of

Petitioner

Full name of Petitioner as it is in the Application

and concerning

Respondent

Full name of Respondent as it is in the Application

**Original Notice for
Personal Service**

To: _____
Petitioner or Respondent

Other person receiving child support in this case, if any.

If the Child Support Recovery Unit is involved in this case, list "Child Support Recovery Unit" on the second line.

- Applicant (the party bringing this case) has a lawsuit asking for a change in child support.
- A copy of the Application to Modify Child Support (form 301) is attached to this Notice.
- Applicant is not represented by an attorney.
- Applicant's contact information during this modification case:

Applicant's name

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address*

For party receiving this Original Notice: Important instructions on next page

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). Disability coordinators cannot provide legal advice. Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.300—Form 304: *Original Notice for Personal Service*, continued

Instructions to Party Receiving the Original Notice

- A. You **must** file an Answer or a Motion with the clerk of court in the above county within **20 days** after you receive this Original Notice. If you do not file an Answer or Motion within **20 days** after receiving this Original Notice, the **court may enter a judgment against you** giving Applicant what he or she asked for in the Application.
- B. For help in this case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at <http://www.iowacourts.gov/> and click on “Court Rules & Forms” or on “For the Public.”
- C. If you received Application form 301, you may use Answer form 315.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at <https://www.iowacourts.state.ia.us/Efile> and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper. Contact the clerk of court in the county where the Application was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Applicant. A Notice of Electronic Filing (NEF) will tell you if the court has excused Applicant from electronic filing. If the court has excused Applicant from electronic filing, you must mail a copy of your Answer or Motion to Applicant.

Important Notice

You should talk to an attorney at once to protect your interests.

Rule 17.300—Form 304a: Original Notice for Personal Service

Applicant must serve the Application on the other party within 90 days after filing the Application. Failure to meet this deadline may result in the court dismissing the Application.

Read the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* on the Iowa Judicial Branch website for additional important instructions.

 *If filing electronically, Applicant must complete form 304.*

 *If filing in paper, Applicant must use this form (304a).*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

Upon the Petition of

Petitioner

Full name of Petitioner as it is in the Application

and concerning

Respondent

Full name of Respondent as it is in the Application

Original Notice for Personal Service

To: _____
Petitioner or Respondent

Other person receiving child support in this case, if any.

If the Child Support Recovery Unit is involved in this case, list "Child Support Recovery Unit" on the second line.

- Applicant (the party bringing this case) has a lawsuit asking for a change in child support.
- A copy of the Application to Modify Child Support (form 301) is attached to this Notice.
- Applicant is not represented by an attorney.
- Applicant's contact information during this modification case:

Applicant's name

Mailing address _____ *City* _____ *State* _____ *ZIP code*

(_____) _____
Phone number _____ *Email address*

Important instructions on next page

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) _____. Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). Disability coordinators cannot provide legal advice. Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.300—Form 304a: *Original Notice for Personal Service*, continued

Instructions to Party Receiving this Original Notice

- You **must** file an Answer or a Motion with the clerk of court in the above county within **20 days** after you receive this Application. If you do not file an Answer or Motion within **20 days** after receiving this Application, the **court may enter a judgment against you** giving Applicant what is asked for in the Application.
- If you received Application form **301**, you may use Answer form **315**.
- After you file your Answer or Motion, you must serve a copy of it on Applicant.

(SEAL)

Clerk of Court

_____ County Courthouse

_____, Iowa _____
City *ZIP code*

Important Notice

You should talk to an attorney at once to protect your interests.

Rule 17.300—Form 306: Directions for Service of Original Notice

Applicant must complete this form if the sheriff or a process server will deliver the Application and Original Notice to the other party.

Do not use this form if the other party has already received the Application and Original Notice.

Do not file this form with the clerk of court in paper or electronically.

Give this form to the sheriff or other process server with your Application (301) and Original Notice (304 if electronically filing or 304a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

County where Application is filed

Equity case number

1. Name and Location of Sheriff or Other Process Server

Check one and fill in the blanks

A. **Sheriff** *In county where the other party will be served*

County

Street address

City

State

ZIP code

B. **Other process server**

Name of other process server serving the Notice

Street address

City

State

ZIP code

2. Person to be Served

Other party's name

(_____)_____
Phone number

Address where the other party can be served

City

State

ZIP code

3. Person Requesting Service

Your (Applicant's) name

(_____)_____
Phone number

Your (Applicant's) present mailing address

City

State

ZIP code

4. Special Instructions for Service *Provide information that will help the sheriff or process server.*

Continued on next page

Rule 17.300—Form 306: *Directions for Service of Original Notice*, continued

5. Costs of Service

Check one

A. Applicant will pay the costs of the Sheriff or other process server.

If you cannot afford the costs, file form 309.

B. Costs for Sheriff deferred by court order: _____

*Clerk of court: Sign only if costs deferred
by court order*

6. Notification

After completion of service, the sheriff or other process server will notify the person requesting service.

_____, 20____
Date signed: Month Day Year Your signature

Rule 17.300—Form 309: Application and Affidavit to Defer Payment of Costs

Applicant uses this form only if Applicant cannot afford to pay the fees to file and serve the Application.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff **cannot be waived**.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

Upon the Petition of

Petitioner

Full name of Petitioner as it is in the Application

and concerning

Respondent

Full name of Respondent as it is in the Application

Equity case no. _____

Application and Affidavit to Defer Payment of Costs

1. Request

A. My name is _____.

B. For my Application and Affidavit, I state that:

Check all that apply

- (1) I am unable to pay the filing fee or service costs or other court costs.
- (2) I ask the court for permission to proceed without prepayment of costs and fees.
- (3) I am filing this Application and Affidavit in good faith.
- (4) I believe I am entitled to what I am asking for in this case.

C. Household

There are _____ people living in my household.
Number

D. My household income is \$ _____ per month.

Put the total amount of all income and benefits before deductions for all members of your household

E. My income comes from:

List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIP.

Rule 17.300—Form 309: *Application and Affidavit to Defer Payment of Costs*, continued

F. My household has the following monthly expenses:

- (1) Rent or mortgage \$ _____
- (2) Utilities \$ _____
- (3) Phone \$ _____
- (4) Food \$ _____
- (5) Transportation \$ _____

G. I have \$ _____ in cash, checking, and savings.

Continued on next page

Rule 17.300—Form 309: *Application and Affidavit to Defer Payment of Costs*, continued

2. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Certification of Service by Mailing or Delivery

Section 3 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Application and Affidavit to the other party or the other party's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

4. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the laws of
Print your name

the State of Iowa that I have read this Application and Affidavit and that the information I have provided in this Application and Affidavit is true and correct.

_____, 20____
Signed on: Month Day Year *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____ _____
Phone number *Email address* *Additional email address – if available*

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.300—Form 310: Affidavit of Service of Original Notice and Application to Modify Child Support

Applicant: Use this form only if someone other than Applicant (you), or a person who is not a sheriff or a process server, delivered a copy of the Application to the other party.

- The person, other than Applicant, who gave the Application and Original Notice to the other party, fills in this form.
- Applicant, or the person who gave the Application and Original Notice to the other party, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Equity case no. _____

Affidavit of Service of Original Notice and Application to Modify Child Support

1. Affidavit

I, _____, delivered a copy of the Original Notice and
Name of person – Cannot be Applicant, sheriff, or process server

Application to Modify Child Support for this case to:

Check one

a.m.

_____ on _____, 20____ at _____
Name of Other Parent Month Day Year Time

p.m.

by handing the other party copies of the attached papers.

2. Oath and Signature

To be completed by the person who gave the Application to the other party.

I, _____, have read this Affidavit of Service, and I certify
Print your name

under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Affidavit of Service is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address – if applicable

* *If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.300—Form 311: *Protected Information Disclosure*

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

 **If filing electronically:**

- **Applicant** must complete this form (311) and file it with the Application (301) and Original Notice (304).
- **The other party** must complete this form if adding or correcting protected information.

 **Paper filers** also may use form 311 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County

County where Application is filed

Upon the Petition of

Equity case no. _____

Petitioner

Full name of Petitioner as it is in the Application

Protected Information Disclosure

and concerning

Respondent

Full name of Respondent as it is in the Application

For electronic filers:

When protected information, as defined in Iowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer’s responsibility and the procedures to use for protecting personal information, refer to Iowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

Name _____
First Middle Last

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	- - XXX-XX-XXXX	Last four digits only
B. Financial account numbers	Full account number	Partial account number only
C. Date of birth	/ / mm/dd/yyyy	Year only
D. Individual taxpayer identification numbers	- - XXX-XX-XXXX	Last four digits only

Rule 17.300—Form 311: *Protected Information Disclosure*, continued

E. Personal identification numbers	<i>Full number</i>	<i>Partial only</i>
F. Other unique identifying numbers	<i>Full number</i>	<i>Partial only</i>
G. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
H. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
I. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
J. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

2. Respondent

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

Name _____
First Middle Last

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
B. Financial account numbers	<i>Full account number</i>	<i>Partial account number only</i>
C. Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>
D. Individual taxpayer identification numbers	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
E. Personal identification numbers	<i>Full number</i>	<i>Partial only</i>
F. Other unique identifying numbers	<i>Full number</i>	<i>Partial only</i>
G. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
H. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
I. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
J. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Rule 17.300—Form 311: *Protected Information Disclosure*, continued

3. Other Parties

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

Name _____
First Middle Last

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	- - XXX-XX-XXXX	<i>Last four digits only</i>
B. Financial account numbers	<i>Full account number</i>	<i>Partial account number only</i>
C. Date of birth	/ / mm/dd/yyyy	<i>Year only</i>
D. Individual taxpayer identification numbers	- - XXX-XX-XXXX	<i>Last four digits only</i>
E. Personal identification numbers	<i>Full number</i>	<i>Partial only</i>
F. Other unique identifying numbers	<i>Full number</i>	<i>Partial only</i>
G. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
H. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
I. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>
J. <i>Additional protected information</i>	<i>Full information</i>	<i>Partial information</i>

Check this box if you are attaching a separate sheet listing additional information for other parties.

4. Children

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

A.

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - XXX-XX-XXXX	<i>Last four digits only</i>
(3) Date of birth	/ / mm/dd/yyyy	<i>Year only</i>

Rule 17.300—Form 311: *Protected Information Disclosure*, continued

B. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

C. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

D. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

E. Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Child's full name	<i>First, middle, last name</i>	<i>Child's initials</i>
(2) Social security number	- - <i>XXX-XX-XXXX</i>	<i>Last four digits only</i>
(3) Date of birth	/ / <i>mm/dd/yyyy</i>	<i>Year only</i>

Check this box if you are attaching a separate sheet listing additional children.

Continued on next page

Rule 17.300—Form 311: *Protected Information Disclosure*, continued

5. Information provided by:

	/s/	
<i>Handwritten signature of party or attorney if filing in paper</i>		<i>Electronic signature of party or attorney if filing electronically</i>

Law firm, if applicable

<i>Mailing address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>

(_____) _____
Phone number

<i>Email address</i>	<i>Additional email address, if applicable</i>

		20	
<i>Month</i>	<i>Day</i>		<i>Year</i>
<i>Date information provided</i>			

Rule 17.300—Form 315: Answer to Application to Modify Child Support

The party served with an Application to Modify Child Support must file an Answer within **20 days** after receiving the Application and Original Notice, or the **court may enter a judgment against that party** giving Applicant what he or she asked for in the Application.

Use this Answer form 315 if you received Application form 301, otherwise use form 316.

Read the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.*
- If filing in paper, you may use form 311 to provide any protected information in full..*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

<p>Upon the Application of</p> <p>_____</p> <p>Petitioner <i>Full name of Petitioner as it is in the Application</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name of Respondent as it is in the Application</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Answer to Application to Modify Child Support</p>
---	--

1. Personal Information *Fill in all information that you know.*

A. Applicant's (the party seeking to modify child support) information *Check one*

If paragraph 1A of the Petition (form 301) is not correct, check (2) and fill in the blanks.

- (1) Applicant's name, birth year, present residence, and contact information are correct in the Application.
- (2) Applicant's name, birth year, present residence, and contact information are not correct in the Application.

The correct information is:

<i>Full name</i>	<i>Birth year</i>
<i>Present street address</i>	<i>City</i>
<i>County</i>	<i>State</i>
<i>()</i>	<i>ZIP code</i>
<i>Phone number</i>	<i>Email address</i>

Rule 17.300—Form 315: *Answer to Application to Modify Child Support*, continued

B. Your (other parent's) information *Check one*

If paragraph 1B of the Petition (form 301) is not correct, check (2) and fill in the blanks.

- (1) Your (other parent's) name, birth year, present residence, and contact information are correct in the Application.
- (2) Your name, birth year, present residence, and contact information are not correct in the Application.

The correct information is:

<i>Full name</i>	<i>Birth year</i>		
<i>Present street address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>
<i>County</i>	<i>()</i> <i>Phone number</i>	<i>Email address</i>	

C. Other person (non-parent) who receives child support *Check one*

- (1) There is no non-parent who gets child support in this case.
- (2) There is a non-parent who gets child support in this case.

If you check (2) check a or b.

- a. The information about the other person who receives child support is correct in the Application.
 - *If you check a skip to 2.*
 - *If paragraph 1C of the Application (form 301) is not correct, check b and fill in the blanks.*
- b. The information about the other person who receives child support is not correct in the Application. The correct information is:

<i>Full name: first, middle, last</i>	<i>Birth year</i>		
<i>Present street address</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>
<i>County</i>	<i>()</i> <i>Phone number</i>	<i>Email address</i>	

2. General Information about this Case

A. Current child support order

If paragraph 2A of the Application (form 301) is not correct, check b and fill in the blanks.

- (1) Date order entered *Check one*
 - a. The Application provides the correct date of the child support order.
 - b. The Application does not provide the correct date of the child support order. The correct date is:

<i>Month</i>	<i>Day</i>	<i>Year</i>
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Rule 17.300—Form 315: *Answer to Application to Modify Child Support*, continued

C. Child Support Recovery Unit (CSRU) *Check one*

- (1) The Child Support Recovery Unit (CSRU) is involved in this case.
- (2) The Child Support Recovery Unit (CSRU) is not involved in this case.

D. Collection Services Center (CSC) *Check one*

- (1) The Collection Services Center (CSC) is involved in this case.

The CSC number is: _____

- (2) The Collection Services Center (CSC) is not involved in this case.

E. Other child support orders *Check one*

- (1) There are no other child support orders for the child or children involved in this case.
- (2) There are other child support orders for the child or children involved in this case.

They are:

<i>Case Number</i>	<i>County</i>	<i>State</i>
--------------------	---------------	--------------

<i>Case Number</i>	<i>County</i>	<i>State</i>
--------------------	---------------	--------------

- Check this box if you are attaching a separate sheet listing additional child support orders.*

F. Children covered by current child support order *Check one*

- (1) The Application correctly identifies the children covered by the current child support order.
- (2) The Application does not correctly identify the children covered by the current child support order. The following children are covered by the current child support order:

First, middle, & last initials of each child	Birth year
(a)	
(b)	
(c)	

First, middle, & last initials of each child	Birth year
(d)	
(e)	
(f)	

- Check this box if you have attached a separate sheet listing additional children.*

Rule 17.300—Form 315: Answer to Application to Modify Child Support, continued

G. Amount of child support

(1) Juvenile court order *If you check a, check i or ii*

- a. It is correct that there is a juvenile court order that changed where the child or children were living.
The person paying support has custody of the children.
- i. The county and case number are correct in the Application.
- ii. The county and case number are not correct in the Application.

If you check ii, provide the correct information below

The correct information is:

County *Case number*

- b. There is no juvenile court order that gives care of the child to the party paying support.

(2) Who children live with *Check a or b*

- a. It is correct that one or more of the children now live with the person paying support.
- b. None of the children now live with the person who is ordered to pay support.

(3) Qualifying for child support *Check a or b*

- a. It is correct that one or more of the children no longer qualify for child support.
- b. There has been no change in the number of children who qualify for child support.

(4) Applicant's income *Check a or b*

- a. I agree that Applicant's income has gone down.
- b. I do not agree that Applicant's income has gone down.

(5) My income *Check a or b*

- a. I agree that my income has gone up.
- b. I do not agree that my income has gone up.

(6) My response to Applicant's "other reason" for requesting a change in child support:

H. Child support amount should be *Check all that apply*

- (1) Raised *Explain* _____
- (2) Lowered *Explain* _____
- (3) Stopped *Explain* _____
- (4) Not be changed *Explain* _____

Rule 17.300—Form 315: *Answer to Application to Modify Child Support*, continued

I. Tax deduction for the children *Check (1) or (2)*

(1) There is no court order at this time on tax deductions for the children.

(2) There is a court order at this time on tax deductions.

If you check (2), check a or b:

a. A court order currently says who gets the tax deduction for the child or children and it should stay the same.

b. A court order currently says who gets the tax deduction for the child or children and it should be changed. *Explain*

J. Health care expenses for the children *Check (1) or (2)*

(1) There is no court order at this time on who pays health care expenses.

(2) There is a court order at this time on who pays health care expenses.

If you check (2), check a or b:

a. A court order currently says who pays for health care expenses for the child or children and it should stay the same.

b. A court order currently says who pays for health care expenses and it should be changed. *Explain*

K. I (the other party) am *Check each that is true*

(1) In the military service

(2) In prison or jail at _____ in _____
Name of facility State

L. Protective or no contact order *Check (1) or (2)*

(1) There is neither a "protective order" nor a "no contact order" between me and Applicant.

(2) There is a "protective order" or "no contact order" between me and Applicant.

If you check (2), fill in the following information:

a. County and state where the order came from: _____
County State

b. Court case number: _____

Rule 17.300—Form 315: *Answer to Application to Modify Child Support*, continued

3. I (the other parent) deny anything in the Application that I have not agreed is correct.

4. My (the other parent's) Request

A. I ask the court to:

Check all that apply. The court will only consider items that are checked.

- (1) Dismiss the Application to Modify Child Support and leave child support as is.
- (2) Raise the current child support payment.
- (2) Lower the current child support payment.
- (3) Stop payment of child support completely.
- (4) Set child support for the parent who does not have the children.
- (5) Change who gets the tax deduction for the child or children.
- (6) Change who pays for health care expenses for the child or children.
- (7) Order that Applicant pay the court fees.
- (8) Order that Applicant pay my attorney fees.
- (9) Other request: _____

Continued on next page

Rule 17.300—Form 315: Answer to Application to Modify Child Support, continued

5. Attorney Help *Check one*

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any	Attorney's P.I.N. # – Ask the attorney		
Business address of attorney or organization	City	State	ZIP code
()	()		
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>	<i>Attorney's email address – optional</i>	

6. Service Instructions for Filing in Paper

Check A or B only if you are filing in paper, not electronically

- A. I will accept service of documents at the attorney's address listed above; or
- B. I will accept service of documents in this case at the mailing address below.

7. Certification of Service by Mailing or Delivery for Filing in Paper

Section 7 to be completed only if filing in paper or if Applicant is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____

I mailed or gave a copy of this Answer to Applicant or Applicant's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address	City	State	ZIP code
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8. Oath and Signature

I, _____, have read this Answer, and I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Answer is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address	City	State	ZIP code
()			
<i>Phone number</i>	<i>Email address</i>	<i>Additional email address – if available</i>	

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Continued on next page

Rule 17.300—Form 315: *Answer to Application to Modify Child Support*, continued

Important Notice

- See next page for instructions for filing an Answer.
- You must serve this Answer on the other parties.
- If the Child Support Recovery Unit (CSRU) is involved in this case, you must also serve the Answer on CSRU.
- See the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* for information on serving papers.

Instructions for Rule 17.300—Form 315: *Answer to Application to Modify Child Support*

Do not file these instructions

Instructions for Filing an Answer to an Application to Modify Child Support

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically unless you get permission from the court to file in paper.** Contact the clerk of court in your county if you are unable to file electronically.

 **Filing your Answer electronically**

- If the Application was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide [How to Register Pro Se \(Self Represented\) for eFiling](#) on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may [directly log in to EDMS](#); or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see [How to eFile to an Existing Case](#).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see [How to Resubmit a Returned Filing](#).
- The NEF will indicate if your Applicant is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on Applicant if he or she does not have an attorney.

 **Filing your Answer in paper**

- Make two photocopies of the original.
- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you must also provide each form you file to the CSRU office that serves the county where your child support case is filed.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Application was filed. The county is listed at the top of the Application (form 301).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on Applicant.
- You can hand one of the copies of the Answer form to Applicant, **or** mail a copy to Applicant spouse at the address shown on the Application.
- If Applicant has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Application if box 5A on the Application is checked.

Do not file these instructions

Rule 17.300—Form 316: General Answer to Application to Modify Child Support

The party served with an Application to Modify Child Support must file an Answer within **20 days** after receiving the Application and Original Notice, or the **court may enter a judgment against that party** giving Applicant what he or she asked for in the Application.

If the Application you received is on form 301, use form 315 for your Answer.

Read the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* on the Iowa Judicial Branch website before using this form.

 *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311).*

 *If filing in paper, you may use form 311 to provide any protected information in full.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

Upon the Petition of

Petitioner

Full name of Petitioner as it is in the Application

and concerning

Respondent

Full name of Respondent as it is in the Application

Equity case no. _____

General Answer to Application to Modify Child Support

1. Answer

A. I admit that the following paragraphs in the Application are true:

List the numbers of the paragraphs in the Application that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

B. I deny that the following paragraphs in the Application are true:

List the numbers of the paragraphs in the Application that you think are false.

C. I do not know whether the following paragraphs in the Application are true:

List the numbers of the paragraphs in the Application that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know something, such as a date, place, or when something happened.

Rule 17.300—Form 316: *General Answer to Application to Modify Child Support*, continued

D. I deny anything in the Application that is not admitted in this Answer.

E. Other information: _____

2. Request *If you do not know what you want, talk to an attorney.*

I ask the court to: *Write here what you would like the court to do. For example, tell the court if you want the amount of child support you pay or receive to stay the same. Be brief. Do not write long descriptions.*

3. Attorney Help *Check one*

A. An attorney did not help me prepare or fill in this paper.

B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

4. Service Instructions

If the party answering the Application is filing in paper *Check one*

A. I will accept service of documents at the attorney's address listed above; or

B. I will accept service of documents in this case at the mailing address below.

Continued on next page

Rule 17.300—Form 316: *General Answer to Application to Modify Child Support*, continued

5. Certification of Service by Mailing or Delivery

Section 5 to be completed only if filing in paper or if Applicant is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name Month Day Year

I mailed or gave a copy of this Answer to Applicant or Applicant's attorney at this address:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address City State ZIP code

6. Oath and Signature

I, _____, have read this Answer, and I certify under penalty
Print your name
of perjury and pursuant to the laws of the State of Iowa that the information I have provided
in this Answer is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address - if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically*

Important Notice

- See next page for instructions for filing an Answer.
- You must serve this Answer on the other parties.
- If the Child Support Recovery Unit (CSRU) is involved in this case, you must also serve the Answer on CSRU.
- See the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* for information on serving papers.

Rule 17.300—Form 316: *General Answer to Application to Modify Child Support****Do not file these instructions*****Instructions for Filing an Answer to an Application to Modify Child Support**

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, [check the map](#) available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, **you must file electronically** unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

 Filing your Answer electronically

- If the Application was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, *see* the eFiler's User Guide [How to Register Pro Se \(Self Represented\) for eFiling on the Iowa Judicial Branch website](#).
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may [directly log in to EDMS](#); or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, *see* [How to eFile to an Existing Case](#).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, *see* [How to Resubmit a Returned Filing](#).
- The NEF will indicate if your Applicant is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on Applicant if he or she does not have an attorney.

 Filing your Answer in paper

- Make two photocopies of the original.
- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you must also provide each form you file to the CSRU office that serves the county where your child support case is filed.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Application was filed. The county is listed at the top of the Application (form 301).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on Applicant.
- You can hand one of the copies of the Answer form to Applicant, **or** mail a copy to Applicant spouse at the address shown on the Application.
- If Applicant has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address.

Do not file these instructions

Rule 17.300—Form 322: Motion in a Child Support Modification

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where the Application is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name of Petitioner as it is in the Application</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name of Respondent as it is in the Application</i></p>	<p>Equity case no. _____</p> <p>Motion in a Child Support Modification</p>
--	---

I am

Check each that applies

- A. Petitioner
- B. Respondent
- C. Applicant

1. Request

A. I ask the court to

Check all that apply. If you check any box in A, you must tell the court why you are making this request in B.

- (1) Change the hearing date that has been set for _____, 20____.
Month Day Year
- (2) Set a hearing date for modification of child support.
- (3) Other request *Explain* _____

B. I am making the request(s) in this Motion because: _____

Continued on next page

Rule 17.300—Form 322: *Motion in a Child Support Modification*, continued

2. Attorney Help

Check one

A. An attorney did not help me prepare or fill in this paper.

B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

3. Certification of Service by Mailing or Delivery

Section 3 to be completed only if filing in paper or if the Applicant or the other party is exempt from electronic filing.

This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Motion to the Applicant or other party, or the Applicant's or other party's attorney at the address below:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address *City* *State* *ZIP code*

4. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Motion and that the information I have provided in this Motion is true and correct.

_____, 20____
Signed on: Month *Day* *Year* *Your signature**

Mailing address *City* *State* *ZIP code*

(_____) _____
Phone number *Email address* *Additional email address – if available*

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.300—Form 323: Response to a Motion in a Child Support Modification

Use this form if your spouse has filed a Motion (most likely form 322) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where the Application is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name of Petitioner as it is in the Application</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name of Respondent as it is in the Application</i></p>	<p>Equity case no. _____</p> <p>Response to a Motion in a Child Support Modification</p>
--	---

I am

Check each that applies

- A. Petitioner
- B. Respondent
- C. Applicant

1. Motion

The other party filed a Motion on _____, 20____.
Month Day Year

2. Response

Check A or B.

- A. I agree with the Motion.
- B. I disagree with the request(s) in the Motion because: *Explain*

Continued on next page

Rule 17.300—Form 323: *Response to a Motion in a Child Support Modification*, continued

3. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney

Business address of attorney or organization City State ZIP code

(_____) _____ (_____) _____ _____
Attorney's phone number Attorney's fax number – optional Attorney's email address – optional

4. Certification of Service by Mailing or Delivery

Section 4 to be completed only if filing in paper or if Applicant or the other party is exempt from electronic filing.

This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name Month Day Year

I mailed or gave a copy of this Response to Applicant or the other party, or Applicant's or the other party's attorney at the address below:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address City State ZIP code

5. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the laws of the State of Iowa that I have read this Response and that the information I have provided in this Response is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____ _____
Phone number Email address Additional email address – if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.300—Form 324: *Child Support Modification Financial Statement*

Caution: This form may require you to provide protected or sensitive information.

Each party must complete one of these forms.

-  *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.*
-  *If filing in paper, you may use form 311 to provide any protected information in full if you have not already done so.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where the Application is filed

<p>Upon the Petition of</p> <p>Petitioner <i>Full name of Petitioner as it is in the Application</i></p> <p>and concerning</p> <p>Respondent <i>Full name of Respondent as it is in the Application</i></p>	<p>Equity case no. _____</p> <p>Child Support Modification Financial Statement</p>
--	--

I am

Check each that applies

- A. Petitioner
- B. Respondent
- C. Applicant

I, _____, state that this is a true and complete statement
Print your name
 of my assets, debts, and present income as of the ____ day of _____, 20__.
Day *Month* *Year*

1. My Income

**How often is income paid?*

W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

A. Current income from employment and other sources <i>Sources of income, not required to list name of employer</i>	Gross Income		Net Income	
	How often?*	Gross amount	How often?*	Net Amount
<i>W,B,M,T</i>	<i>Before taxes</i>	<i>W,B,M,T</i>	<i>After taxes</i>	
(1) Wages from employer <i>Job:</i> <i>Title:</i>	\$	\$	\$	\$
(2) Wages from employer <i>Job:</i> <i>Title:</i>	\$	\$	\$	\$
(3) Other income <i>Describe source:</i>	\$	\$	\$	\$

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued

(4) Other income <i>Describe source:</i>		\$		\$
(5) Other income <i>Describe source:</i>		\$		\$
Total gross and net income from employment and other sources		\$ Gross income total		\$ Net income total
B. Deductions allowed for child support calculations				
Tax status	Yes	No		
I am currently married to the other parent <i>Check Yes or No</i>				
I have custody of the children in this case <i>Check Yes or No</i>				
(1) Number of exemptions				
Yourself <i>Guidelines allow one exemption for parent</i>	1			
Children				
(2) Income tax withheld <i>Federal</i>				\$
<i>State</i>				\$
(3) FICA <i>Social Security & Medicare</i>				\$
(4) Mandatory pension contribution				\$
(5) Mandatory occupational license fees				\$
(6) Union dues				\$
(7) Prior court-ordered child support <i>Paid to:</i>				\$
<i>Paid to:</i>				\$
<i>Paid to:</i>				\$
(8) Prior court-ordered medical support <i>Paid to:</i>				\$
<i>Paid to:</i>				\$
<i>Paid to:</i>				\$

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued

(9) Prior court-ordered spousal support (alimony) <i>Paid to:</i>				\$
(10) Actual child care expenses due to employment <i>custodial parent only</i>				\$
Total deductions				\$

Check this box if you have attached a sheet with additional information on your income and deductions.

2. Social Security Disability (SSD):

A. SSD benefits paid to you

(1) Amount paid for your expenses \$ _____ per month

(2) Benefit paid for each child in your home \$ _____ per month

a. Number of children receiving benefits _____ children

b. List the children in your home who receive SSD benefits *Use initials only*

First, middle, & last initials of each child	Birth year
i.	
ii.	
iii.	

First, middle, & last initials of each child	Birth year
iv.	
v.	
vi.	

Check this box if you have attached a sheet listing additional children who live in your home and receive Social Security Disability (SSD).

B. Benefits paid to other person children are living with

(1) Benefit paid for each child in other person's home \$ _____ per month

(2) Number of children receiving benefits _____ children

(3) List the children who receive SSD benefits but live with someone other than you.
Use initials only.

First, middle, & last initials of each child	Birth year
i.	
ii.	
iii.	

First, middle, & last initials of each child	Birth year
iv.	
v.	
vi.	

Check this box if you have attached a sheet listing additional children who do not live in your home and receive Social Security Disability (SSD).

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued**3. Qualified additional dependent deduction**

- List the initials and birth year of each child you are the legal parent of.
- Do not include any children covered by the child support order involved in this case.

First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth year
(1)		(4)	
(2)		(5)	
(3)		(6)	

- Check this box if you have attached a sheet listing additional children for the qualified additional dependent deduction.

4. Extraordinary visitation *For noncustodial parent only*

- (1) Number of court-ordered overnights in a year _____.
If this number exceeds 127 days per year, provide a copy of the court order containing the visitation provisions.
- (2) Physical care
- a. The court ordered equally shared physical care for the children.
If the court ordered equally shared physical care for the children, the extraordinary visitation credit does not apply.
- b. The court did not order equally shared physical care for the children.

Continued on next page

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued

5. Assets *Things you own.*

A. Real estate

Property Address	Purchase Price	Debt <i>Total amount you still owe on it</i>
(1)	\$	\$
(2)	\$	\$

Check this box if you have attached a sheet with additional information on other real estate.

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

Make <i>Make (e.g. Ford)</i>	Year	Market value <i>What it would sell for</i>
(1)		\$
(2)		\$
(3)		\$

Check this box if you have attached a sheet with additional information on other vehicles.

C. Securities, stocks, & bonds

Current value of:

(1) Stocks \$ _____

(2) Bonds \$ _____

D. Life insurance **Owner: P = Petitioner R = Respondent J = Joint (Both)*

Life insurance <i>Company name</i>	Owner* <i>P,R,J</i>	Cash value <i>Not death benefit</i>	Loan from cash value <i>Total amount still owed on loan</i>	Cash value <i>Minus loan owed</i>
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued

E. Bank accounts

Checking and savings accounts <i>Bank or Credit Union name</i> <i>If you do not use bank accounts,</i> <i>write "Cash"</i>	Account type <i>Checking or Savings</i>	Net value <i>Cash value minus loan /</i> <i>overdraft owed</i>
(1)		\$
(2)		\$
(3)		\$

Check this box if you have attached a sheet with additional information on other checking and savings accounts.

F. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

**Owner: P = Petitioner R = Respondent J = Joint (Both)*

Other assets <i>Describe</i>	Owner* <i>P,R,J</i>	Market value <i>What it would</i> <i>sell for</i>	Debt <i>Total amount you</i> <i>still owe on it</i> and to whom owed	Net value <i>Market value</i> <i>minus debt owed</i>
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other assets.

6. Expenses

A. My expenses

List your living expenses

**How often paid?: W = Weekly B = Bi-weekly (every other week) M = Monthly*

T = Two times a month A = Annually

Type of expense	Paid to	How often paid?* <i>W,B,M,T,A</i>	Monthly payment
(1) House payment or rent			\$
(2) Food <i>At home & restaurants</i>			\$
(3) Transportation <i>(gas, bus fare)</i> <i>Not car loan payments – see (12).</i>			\$
(4) Clothing			\$

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued

(5) Medical, dental <i>Not health insurance payments – see (10).</i>			\$
(6) Utilities (<i>gas, electric</i>)			\$
(7) Phone			\$
(8) Cable / satellite television / internet			\$
(9) Car insurance payment			\$
(10) Health insurance payment			\$
(11) Credit card payments			\$
(12) Car loan payments			\$
(13) Other loan payments			\$
(14) Other expense <i>Identify:</i>			\$
(15) Other expense <i>Identify:</i>			\$
(16) Other expense <i>Identify:</i>			\$
(17) Totals from attached sheets, if any <input type="checkbox"/> <i>Check this box if you have attached a sheet with additional information on your expenses.</i>			\$
Total expenses			\$

7. My debts *Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.*

**How often paid?:* *W = Weekly* *B = Bi-weekly (every other week)*
M = Monthly *T = Two times a month* *A = Annually*

Payable to	Item or service	Amount	How often paid?* <i>W,B,M,T,A</i>	Balance Due
A.				\$
B.				\$
C.				\$
D.				\$
E. Totals from attached sheets, if any				\$

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued

<input type="checkbox"/> Check this box if you have attached a sheet with additional information on other debts, and enter the total.			
Total other debts <i>Including amounts shown on attached sheet, if any.</i>			\$

8. Current spouse's income

- List your **current** spouse's information.
- This information will not be used to determine child support obligations.

*How often is income received?

W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

A. Current income from employment and other sources <i>Sources of income, not required to list name of employer</i>	Gross Income		Net Income	
	How often?*	Gross amount	How often?*	Net Amount
	<i>W,B,M,T</i>	<i>Before taxes</i>	<i>W,B,M,T</i>	<i>After taxes</i>
(1) Wages from employer <i>Job:</i> <i>Title:</i>		\$		\$
(2) Wages from employer <i>Job:</i> <i>Title:</i>		\$		\$
(3) Other income <i>Describe source:</i>		\$		\$
(4) Other income <i>Describe source:</i>		\$		\$
Total gross and net income from employment and other sources		\$ Gross income total		\$ Net income total

9. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
 B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

Rule 17.300—Form 324: *Child Support Modification Financial Statement*, continued

10. Certification of Service by Mailing or Delivery

Section 10 to be completed only if filing in paper or if Applicant the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.

I, _____, certify that on _____, 20____
Print your name Month Day Year

I mailed or gave a copy of this Child Support Modification Financial Statement to Applicant or the other party or Applicant's or the other party's attorney at the address below:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address City State ZIP code

11. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Child Support Modification Financial Statement and that the information I have provided in this Statement is true and correct.

_____, 20____
*Signed on: Month Day Year Your signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address - if available

* *Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.300—Form 325: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where the Application is filed

Upon the Petition of

Petitioner

Full name of Petitioner as it is in the original case

and concerning

Respondent

Full name of Respondent as it is on the Application

Equity case no. _____

Affidavit of Mailing Notice

1. Attorney Help

Check one

- A. An attorney did not help me prepare or fill in this paper.
- B. An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

Name of attorney or organization, if any *Attorney's P.I.N. # – Ask the attorney*

Business address of attorney or organization *City* *State* *ZIP code*

(_____) _____ (_____) _____ _____
Attorney's phone number *Attorney's fax number – optional* *Attorney's email address – optional*

Important Notice

A party **must** file this Affidavit with the clerk of court if he or she asks the court for a default Decree for modification of child support. The party **must** also complete the oath and signature section on the next page.

Oath and Signature on next page

Rule 17.300—Form 325: *Affidavit of Mailing Notice*, continued

2. Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that on the _____ day of _____, 20____, I sent by ordinary
Day Month Year
mail with proper postage, the following paper or papers:

Check one

Notice of Intent to File a Written Application for Default Decree for modification of child support, or

Other document (*describe*): _____.

to the other party's last-known address below.

Other party's street address City State ZIP code

_____, 20____
*Signed on: Month Day Year Applicant's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address - if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

Rule 17.300—Form 326: Notice of Intent to File Written Application for Default Decree*If you do not understand how to use this form, or if you should use this form, talk to an attorney.*

In the Iowa District Court for _____ County
County where your case is filed

Upon the Petition of**Petitioner***Full name of Petitioner as it is in the original case*

and concerning

Respondent*Full name of Respondent as it is in the Application*

Equity case no. _____

**Notice of Intent to File Written
Application for Default Decree****To party receiving this Notice:**

First name Middle name Last name

Date of Notice: _____, 20____
Month Day Year

Important notice to party receiving this Notice:

You are in default because you have failed to take action required of you in this case. Unless you act within **10 days** from the date of this Notice, a default Decree modifying Child Support will be entered against you without a hearing, and you may lose important rights. **You should seek legal advice at once.**

Handwritten signature of party filing this Notice or attorney if filing in paper */s/* _____
Electronic signature of party filing this Notice or attorney if filing electronically

The person who provided the signature above must fill in the information below.

Present street address (If attorney, firm address) City State ZIP code

(_____) _____
Phone number Email address

Instructions for party filing this Notice** Filing your Notice electronically**

EDMS will automatically serve the party receiving this Notice unless that party is exempt from electronic filing requirements.

 Filing your Notice in paper (if you have received permission from the court to file in paper)

1. Deliver a copy of this form to the party receiving this Notice by mail or in person.
2. Complete form 325 and file the original at the clerk of court's office.
3. File the original of this form (326) at the clerk of court's office.
4. Keep a copy for your records.

Rule 17.300—Form 327: Request for Relief in a Child Support Modification

Use this form only if you have filed or answered an Application to Modify Child Support (301) and:

- The other party did not file an Answer (315), or
- The other party will not work with you to prepare a Settlement Agreement (328).

Caution: This form may require you to provide protected or sensitive information.

 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.

 If filing in paper, you may use form 311 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application is filed

<p>Upon the Petition of</p> <p>_____</p> <p>Petitioner <i>Full name of Petitioner as it is in the Application</i></p> <p>and concerning</p> <p>_____</p> <p>Respondent <i>Full name of Respondent as it is in the Application</i></p>	<p>Equity case no. _____</p> <p style="text-align: center;">Request for Relief in a Child Support Modification</p>
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1. Personal Information *Fill in all information that you know. If you have been assaulted by your spouse and you fear for your safety, you may leave your street address, phone number, and email blank.*

A. I am

Check each that applies

- (1) Petitioner
- (2) Respondent
- (3) Applicant

B. Your information: _____
Birth year

Your present street address _____ *City* _____ *State* _____ *ZIP code*

County (_____) _____ *Phone number* _____ *Email address*

C. Other parent's information: _____
Birth year

Other parent's present street address _____ *City* _____ *State* _____ *ZIP code*

 (_____) _____

Rule 17.300—Form 327: *Request for Relief in a Child Support Modification*, continued

D. Other person (non-parent) who receives child support: _____
Birth year

Full name: first, middle, last

Present street address _____ *City* _____ *State* _____ *ZIP code*

County _____ *() Phone number* _____ *Email address*

2. Request for Relief

A. Child support

Check each that is true, and fill in the blanks for the items you check.

(1) Child support should be **raised** from \$ _____ per month to \$ _____
 per month, beginning _____, 20____ for:
Month Day Year

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

Check this box if you have attached a separate sheet listing additional children.

(2) Child support should be **lowered** from \$ _____ per month to \$ _____
 per month beginning _____, 20____ for:
Month Day Year

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

Check this box if you have attached a separate sheet listing additional children.

(3) Check here if you want child support to be higher or lower than the Child Support Guidelines amount. *If you check this, write the amount you want and explain why below.*

a. Amount requested: \$ _____ per month

Rule 17.300—Form 327: Request for Relief in a Child Support Modification, continued

b. Child support should be different than the Guidelines amount because:

(4) Child support should be **stopped** beginning on the

_____ day of _____, 20_____ for:
Day Month Year

First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth year
a.		d.	
b.		e.	
c.		f.	

Check this box if you have attached a separate sheet listing additional children.

B. Tax deduction for the children

Check (1) or (2)

(1) There is no court order at this time on tax deductions.

(2) There is a court order at this time on tax deductions.

If you check (2), check a or b:

a. A court order currently says who gets the tax deduction for the child or children and it should stay the same.

b. A court order currently says who gets the tax deduction for the child or children and it should be changed as set forth in the table below. *Explain*

First, middle, & last initials of each child	Birth year	Person who should now claim child for tax deduction
i.		
ii.		
iii.		
iv.		
v.		

Check this box if you have attached a separate sheet listing additional children.

Rule 17.300—Form 327: *Request for Relief in a Child Support Modification*, continued

C. Health insurance or cash medical support

Check (1) or (2)

- (1) There is no court order at this time on who pays health insurance or cash medical support.
- (2) There is a court order at this time on who pays health insurance or cash medical support.

If you check (2), check a or b

- a. A court order currently says who pays for health care expenses for the child or children and it should stay the same.
- b. A court order currently says who pays for health care expenses and it should be changed as set forth in the table below. *Explain*

First, middle, & last initials of each child	Birth year	Parent who should now provide health insurance or cash medical support
i.		
ii.		
iii.		
iv.		
v.		

Check this box if you are attaching a separate sheet listing additional children.

- (3) I should pay % _____ of the out-of-pocket health care expenses.
- (4) The other parent should pay % _____ of the out-of-pocket health care expenses.
- (5) I should pay % _____ in cash medical support.
- (6) The other parent should pay % _____ in cash medical support.

D. Court Fees

Check one

- (1) All court fees should be paid by me.
- (2) All court fees should be paid by the other parent.
- (3) The other parent and I should pay one-half of the **remaining** court fees.
- (4) The other parent and I should pay one-half of the **total** court fees.

Rule 17.300—Form 327: *Request for Relief in a Child Support Modification*, continued

E. Attorney's Fees

Check one

(1) My attorney's fees

- a. I have no attorney's fees.
- b. I will pay my own attorney's fees.
- c. I ask that the other party pay \$ _____ for my attorney's fees.

3. Necessary Documents

I ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Decree Modifying Child Support.

4. Other Request for Relief *Attach additional sheets if necessary*

5. Statements of Understanding and Fact

Check each that applies

- a. I have made a full disclosure of my income to the court.
- b. This Request for Relief addresses all issues in the Application to Modify Child Support.
- c. I want the court to approve this Request for Relief and make it part of the final Decree Modifying Child Support.

Continued on next page

Rule 17.300—Form 327: *Request for Relief in a Child Support Modification*, continued**6. Attorney Help***Check one*(1) An attorney did not help me prepare or fill in this paper.(2) An attorney helped me prepare or fill in this paper.*If you check (2), you must fill in the following information:*

_____ <i>Name of attorney or organization, if any</i>		_____ <i>Attorney's P.I.N. # – Ask the attorney</i>	
_____ <i>Business address of attorney or organization</i>		_____ <i>City</i>	_____ <i>State</i>
_____ <i>Attorney's phone number</i>		_____ <i>Attorney's fax number – optional</i>	_____ <i>Attorney's email address – optional</i>

7. Certification of Service by Mailing or Delivery*Section 7 to be completed only if filing in paper or if Applicant or the other party is exempt from electronic filing.**This document, if filed electronically, will automatically be served on registered parties.*I, _____, certify that on _____, 20____
Print your name *Month* *Day* *Year*

I mailed or gave a copy of this Request to Applicant or the other party or Applicant's or the other party's attorney at the address below:

Name of person to whom I delivered or mailed it

Party's or attorney's mailing address

City

State

ZIP code

8. Oath and SignatureI, _____, have read this Request, and I certify under penalty
Print your name

of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Request is true and correct.

_____, 20____
Signed on: Month *Day* *Year* *Your signature**_____
*Mailing address*_____
*City*_____
*State*_____
ZIP code(_____) _____
Phone number *Email address* *Additional email address – if available*** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically*

Rule 17.300—Form 328: Settlement Agreement on an Application to Modify Child Support

Use this form only if:

- You and the other party both agree to the terms of a Settlement Agreement.
- There is a current Iowa child support order in effect.
- You would like to increase, decrease, or stop child support
- There is on file an Application to Modify Child Support.

Caution: This form may require you to provide protected or sensitive information.

-  *If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.*
-  *If filing in paper, you may use form 311 to provide any protected information in full.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for _____ County
County where Application was filed

Upon the Petition of

Petitioner

Full name of Petitioner as it is in the Application

and concerning

Respondent

Full name of Respondent as it is in the Application

Equity case no. _____

Settlement Agreement on an Application to Modify Child Support

1. Applicant's Information *Fill in all information that you know. If you have been assaulted by your spouse and you fear for your safety, you may leave your street address, phone number, and email blank.*

A. Applicant's information:

Birth year

Applicant's present street address _____
City _____
State _____
ZIP code

County _____
Phone number _____
Email address

B. Other parent's information:

Birth year

Other parent's present street address _____
City _____
State _____
ZIP code

County _____
Phone number _____
Email address

Rule 17.300—Form 328: *Settlement Agreement on an Application to Modify Child Support*, continued

- (4) Child support should be **stopped** beginning on the

_____ day of _____, 20____ for:
Day Month Year

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

Check this box if you have attached a separate sheet listing additional children.

B. Tax deduction for the children

Check (1) or (2).

- (1) There is no court order at this time on tax deductions.
 (2) There is a court order at this time on tax deductions.

If you check (2), check a or b:

- a. A court order currently says who gets the tax deduction for the child or children and it should stay the same.
 b. A court order currently says who gets the tax deduction for the child or children and it should be changed as set forth in the table below. *Explain*

First, middle, & last initials of each child	Birth year	Person who should now claim child for tax deduction.
i.		
ii.		
iii.		
iv.		
v.		

Check this box if you have attached a separate sheet listing additional children.

C. Health insurance or cash medical support

Check (1) or (2)

- (1) There is no court order at this time on who pays health insurance or cash medical support.
 (2) There is a court order at this time on who pays health insurance or cash medical support.

If you check (2), check a or b

Rule 17.300—Form 328: *Settlement Agreement on an Application to Modify Child Support*, continued

- a. A court order currently says who pays for health care expenses for the child or children and it should stay the same.
- b. A court order currently says who pays for health care expenses and it should be changed as set forth in the table below. *Explain*

First, middle, & last initials of each child	Birth year	Person who should now provide health insurance or cash medical support
i.		
ii.		
iii.		
iv.		
v.		

Check this box if you are attaching a separate sheet listing additional children.

- (3) Applicant should pay % _____ of the out-of-pocket health care expenses.
- (4) The other parent should pay % _____ of the out-of-pocket health care expenses.
- (5) Applicant should pay % _____ in cash medical support.
- (6) The other parent should pay % _____ in cash medical support.

D. Court Fees

Check one

- (1) All court fees should be paid by Applicant.
- (2) All court fees should be paid by the other parent.
- (3) The other parent and Applicant should pay one-half of the **remaining** court fees.
- (4) The other parent and Applicant should pay one-half of the **total** court fees.

Continued on next page

Rule 17.300—Form 328: *Settlement Agreement on an Application to Modify Child Support*, continued

E. Attorney's Fees

Check one

(1) Applicant's attorney's fees

- a. Applicant has no attorney's fees.
- b. Applicant will pay Applicant's own attorney's fees.
- c. Applicant asks that the other party pay \$ _____ for Applicant's attorney's fees.

(2) The other party's attorney's fees

- a. The other party has no attorney's fees.
- b. The other party will pay his or her own attorney's fees.
- c. The other party asks that Applicant pay \$ _____ for the other party's attorney's fees.

3. Necessary Documents

We ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Decree Modifying Child Support.

4. Other Agreements *Attach additional sheets if necessary*

5. Attorney Help

A. Applicant

Check one

- (1) An attorney did not help the Applicant prepare or fill in this paper.
- (2) An attorney helped the Applicant prepare or fill in this paper.

If you check B, you must fill in the following information:

<i>Name of attorney or organization, if any</i>	<i>Attorney's P.I.N. # – Ask the attorney</i>		
<i>Business address of attorney or organization</i>	<i>City</i>	<i>State</i>	<i>ZIP code</i>
() _____	() _____	_____	
<i>Attorney's phone number</i>	<i>Attorney's fax number – optional</i>	<i>Attorney's email address – optional</i>	

B. The other party

Check one

- (1) An attorney did not help the other party prepare or fill in this paper.
- (2) An attorney helped the other party prepare or fill in this paper.

Rule 17.300—Form 328: *Settlement Agreement on an Application to Modify Child Support*, continued

If you check (2), you must fill in the following information:

_____ <i>Name of attorney or organization, if any</i>		_____ <i>Attorney's P.I.N. # – Ask the attorney</i>	
_____ <i>Business address of attorney or organization</i>		_____ <i>City</i>	_____ <i>State</i>
_____ <i>ZIP code</i>			
(_____) _____ <i>Attorney's phone number</i>	(_____) _____ <i>Attorney's fax number – optional</i>	_____ <i>Attorney's email address – optional</i>	

6. Oaths and Signatures

This Settlement Agreement addresses all issues in our modification of child support. We have made a full disclosure of our income to the court. We want the court to approve this Agreement and make it a part of the final Decree Modifying Child Support.

A. Applicant's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in this child support modification. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court.

_____, 20_____
*Month Day Year Applicant's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address – if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

B. The other party's Oath and Signature

I, _____, certify under penalty of perjury and pursuant to the
Print your name

laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in this child support modification. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court.

_____, 20_____
*Month Day Year Other party's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address – if available

** Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*