



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

Upon the Petition of

Petitioner *Full name: first, middle, last*

and concerning

Respondent *Full name: first, middle, last*

Case no. _____

**Motion to Disestablish
Legal Parent**

I am *Check A. or B.*

- 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.*

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 Services (CSS)

Check A. or B.

- A. CSS is providing services.
Note: You must give a copy of this Motion to CSS if it is providing services.
- B. CSS is not providing services.

Continued on next page

5. Attorney help

Check A. or B.

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

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

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

6. Certification of service by mailing or delivery

Section 6 to be completed **only** if submitting a **paper form** to the clerk of court for filing or if the other party is **excused** from electronic filing.

This document 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

* This form may be signed either by using a digitized signature, see instructions at www.iowacourts.gov/for-the-public/court-forms/, or by printing and hand signing.