

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*

Equity case no. _____

Motion to Disestablish Legal Parent

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.*

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

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.*