

Small Claims Form 3.7: *Original Notice and Petition against Third Party Defendant(s)*

In the Iowa District Court for _____ County	
<div style="border-bottom: 1px solid black; padding-bottom: 2px;">Plaintiff(s)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Name)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Address)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Name)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Address)</div> <div style="text-align: center; padding: 5px 0;">vs. Defendant(s)/Third Party Plaintiff(s)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Name)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Address)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Name)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Address)</div> <div style="text-align: center; padding: 5px 0;">vs. Third Party Defendant(s)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Name)</div> <div style="border-bottom: 1px solid black; padding-bottom: 2px;">(Address)</div>	<div style="text-align: center; font-weight: bold; padding: 10px 0;">Original Notice and Petition against Third Party Defendant(s)</div> <div style="font-size: small; padding-top: 10px;">If you need assistance to participate in court due to a disability, call the disability coordinator (information at https://www.iowacourts.gov/for-the-public/ada/). Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). Disability coordinators cannot provide legal advice.</div>
(Name)	(Name)
(Address)	(Address)

To Third Party Defendant(s), _____:
(Name(s) of Third Party Defendant(s))

1. **You are notified** that, _____, as Third Party Plaintiff(s), demand(s) from you the amount of \$ _____ because (state briefly the basis for demand, not to exceed \$6500):

2. **Judgment may be entered against you unless** you file an Appearance and Answer within **20 days** of the service of the Original Notice upon you. Judgment may include the amount requested plus interest and court costs.

3. You must electronically file the Appearance and Answer using the Iowa Judicial Branch Electronic Document Management System (EDMS) at <https://www.iowacourts.state.ia.us/EFile>, unless you obtain from the court an exemption from electronic filing requirements.

4. If your Appearance and Answer is filed within **20 days** and you deny this Third Party Petition, you will receive electronic notification through EDMS of the time and place for the hearing on this matter.

5. If you electronically file, EDMS will serve a copy of the Appearance and Answer on Plaintiff(s) or on the attorney(s) for Plaintiff(s). The Notice of Electronic Filing will indicate if Plaintiff(s) is (are) exempt from electronic filing, and if you must mail a copy of your Appearance and Answer to Plaintiff(s).

6. You must also notify the clerk's office of any address change.

Continued on next page

/s/ _____
Filing Third Party or Attorney

Law firm, or entity for which filing is made, if applicable

Mailing address

Telephone number

Email address

Additional email address, if applicable

/s/ _____
Second Third Party, if applicable

Law firm, or entity for which filing is made, if applicable

Mailing address

Telephone number

Email address

Additional email address, if applicable

Small Claims Form 3.7, page 2 of 3*

*Upon electronic filing, a clerk's signature page will be attached to this document as page 3.