### Rule 17.400—Form 411: 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 the Iowa Rules of Electronic Filing in 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 (411) and file it with the Petition (form 401) and Original Notice (form 404).
- **Respondent** must complete this form if adding or correcting protected information.

**Paper filers** also may use form 411 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	ounty where the case is filed
Upon the Petition of	Equity case no.
	Protected Information Disclosure
Petitioner Full name: first, middle, last	
and concerning	
<b>Respondent</b> Full name: first, middle, last	

#### 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 nonconfidential 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 of Electronic Procedure, Division VI, Personal Privacy Protection. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

### **1. Petitioner** *The parent who filed for custody and visitation.*

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

ne		
First	Middle	Last
Protected information type	(See Rules 16.602 and 16.604)	
A. Social security number	 XXX-XX-XXXX	Last four digits only
B. Date of birth	/ / mm/dd/yyyy	Year only
C. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only

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	Personal identification numbers (if no social security number)	Full number	Partial only
E.	Other unique identifying numbers	Full number	Partial only
F.			
	Additional protected information	Full information	Partial information
G.			
	Additional protected information	Full information	Partial information
Н.			
	Additional protected information	Full information	Partial information
I.			
	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 other parent who did not file for custody and visitation.*

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.

First	Middle	Last
Protected information type	Complete information (See Rules 16.602 and 16.604	
A. Social security number	 XXX-XX-XXXX	Last four digits only
B. Date of birth	/ / mm/dd/yyyy	Year only
C. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
<ul> <li>D. Personal identification numbers (if no social security number)</li> </ul>	Full number	Partial only
E. Other unique identifying numbers	Full number	Partial only
F.		
Additional protected information	Full information	Partial information
G. Additional protected information	Full information	Partial information
H.		
Additional protected information	Full information	Partial information
I.		
Additional protected information	Full information	Partial information

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

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### 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.* 

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. Date of birth	/ / mm/dd/yyyy	Year only
C. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
D. Personal identification numbers (if no social security number)	Full number	Partial only
E. Other unique identifying numbers	Full number	Partial only
F. Additional protected information	Full information	Partial information
G. Additional protected information	Full information	Partial information
H. Additional protected information	Full information	Partial information
I. Additional protected information	Full information	Partial information

*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	First, middle, last name	Child's initials
	(2) Social security number		Last four digits only
	(3) Date of birth	/ / mm/dd/yyyy	Year only

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

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

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

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

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

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# 5. Information provided by:

	/s/		
Handwritten signature of Petitioner or attorney if filing in paper	Electronic signa if filing electron	ture of Petitioner ically	or attorney
Law firm, if applicable			
Mailing address	City	State	ZIP code
() Phone number			
Email address	Additional email ad	dress, if applicab	ble
Month Day Year Date signed			