



**Rule 13.35—Form 13: Notice of Appeal from Findings of Magistrate or Judicial Hospitalization Referee**

In the Iowa District Court for \_\_\_\_\_ County  
*County where Notice is filed*

**In the Matter of**  
 \_\_\_\_\_,  
**Respondent** *Full name: first, middle, last*  
**Alleged to be a Person with a  
 Substance-Related Disorder**

No. \_\_\_\_\_

**Notice of Appeal from Findings of  
 Magistrate or Judicial Hospitalization  
 Referee**

Iowa Code § 229.21(3)

1. To: The clerk of the district court for \_\_\_\_\_ County.  
*County where Notice is filed*
2. Respondent appeals to the district court the findings of the magistrate or judicial hospitalization referee that Respondent is a person with a substance-related disorder, made on \_\_\_\_\_, 20\_\_\_\_.  
*Month Day Year*
3. Respondent requests a review of this matter by a judge of the district court in accordance with Iowa Code section 229.21(3).
4. **Signature**

*Printed name*

*Signature\**

Date: \_\_\_\_\_, 20\_\_\_\_.  
*Month Day Year*

**Signed by:**

*Check one*

- Respondent
- Attorney
- Next friend of Respondent
- Guardian of Respondent

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