

**493—10.7(815) Forms.** The following forms are recommended for use in carrying out these rules.

**10.7(1)** *Adult affidavit of financial status form.*

**In the Iowa District Court for \_\_\_\_\_ County**

State of Iowa, or _____	:	No. _____
Plaintiff/Petitioner	:	
vs.	:	_____ Criminal
_____	:	_____ Civil
Defendant/Respondent		

**Financial Affidavit/Application for Appointment of Counsel/Order**

Name: \_\_\_\_\_ Social Security No. \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_

Street                      City                      State                      Zip

Pending charges \_\_\_\_\_ Jail \_\_\_\_\_ yes \_\_\_\_\_ no

Do you have a job? \_\_\_\_\_ Who do you work for? \_\_\_\_\_ Full-Time    Part-Time

How much do you earn before taxes or deductions? \_\_\_\_\_ per hr/mo/yr (Circle) Hours/Week \_\_\_\_\_

Does your spouse live with you? \_\_\_\_\_ Number of children living with you \_\_\_\_\_

Does anyone who lives with you have a job? \_\_\_\_\_ How much do they earn \_\_\_\_\_ per hr/mo/yr?

List all other income you, or anyone living with you has \_\_\_\_\_

List what you own including money in banks, vehicles, real estate, cash, or anything else worth more than \$100

List amounts you pay monthly for mortgages, rent, car loans, credit cards, child support, any other debts

**I understand that I may be required to repay the State for all or part of my attorney fees and costs, I may be required to sign a wage assignment, and I must report any changes in financial status. I certify under penalty of perjury that the statements I make in this application are true and that I am financially unable to employ an attorney to represent me.**

Date \_\_\_\_\_ Signature \_\_\_\_\_

**Order**

The Court finds as follows:

\_\_\_\_\_ Not eligible for court-appointed counsel.

\_\_\_\_\_ Income at or below 125% of guidelines, defendant unable to pay an attorney.

\_\_\_\_\_ Income between 125% and 200% of guidelines, not appointing would cause substantial financial hardship.

\_\_\_\_\_ Income 200% or more of guidelines, felony charge, not appointing would cause substantial financial hardship.

Application is \_\_\_\_\_ denied \_\_\_\_\_ approved. \_\_\_\_\_ (\_\_\_\_\_) is appointed.  
(attorney) (phone)

Date \_\_\_\_\_ Judge \_\_\_\_\_  
10.7(2) *Juvenile affidavit of financial status form.*

In the Juvenile Court for \_\_\_\_\_ County, Iowa

In the Interest of \_\_\_\_\_ : Juvenile No. \_\_\_\_\_  
\_\_\_\_\_ :  
Child/Children \_\_\_\_\_

**Financial Affidavit of Parent**  
**Application for Appointment of Counsel for \_\_\_\_\_ Child \_\_\_\_\_ Parent**  
**Order**

Name: \_\_\_\_\_ Social Security No. \_\_\_\_\_ D.O.B. \_\_\_\_\_

Address: \_\_\_\_\_ Phone \_\_\_\_\_  
Street City State Zip

Case: CINA \_\_\_ TPR \_\_\_ Other \_\_\_\_\_ Relationship to Child: Parent \_\_\_\_\_ Other \_\_\_\_\_

Do you have a job? \_\_\_\_\_ Who do you work for? \_\_\_\_\_ Full-Time Part-Time

How much do you earn before taxes or deductions? \_\_\_\_\_ per hr/mo/yr (Circle) Hours/Week \_\_\_\_\_

Does your spouse live with you? \_\_\_\_\_ Number of children living with you \_\_\_\_\_

Does your spouse have a job? \_\_\_\_\_ How much does your spouse earn \_\_\_\_\_ per hr/mo/yr?

List all other income you and/or your spouse has \_\_\_\_\_

List what you own including money in banks, vehicles, real estate, cash, or anything else worth more than \$100 \_\_\_\_\_

List amounts you pay monthly for mortgages, rent, car loans, credit cards, child support, any other debts \_\_\_\_\_

**I understand that I may be required to repay the State for all or part of my attorney fees and costs and those of my child, I may be required to sign a wage assignment, and I must report any changes in financial status. I certify under penalty of perjury that the statements I make in this application are true and that I am financially unable to employ an attorney to represent me.**

Date \_\_\_\_\_ Signature \_\_\_\_\_

## Order

The Court finds as follows:

\_\_\_\_ Not eligible for court-appointed counsel.

           Child eligible for court-appointed counsel, parent may be responsible for attorney fees.

\_\_\_\_\_Applicant eligible for court-appointed counsel, not appointing counsel would constitute substantial financial hardship considering income, assets, and nature of the proceedings.

Application is \_\_\_\_\_ denied \_\_\_\_\_ approved. \_\_\_\_\_ (\_\_\_\_\_) is appointed.  
(attorney) (phone)

Date \_\_\_\_\_ Judge \_\_\_\_\_  
10.7(3) Wage assignment form.

**In the Iowa District Court for \_\_\_\_\_ County**

STATE OF IOWA, \_\_\_\_\_, :  
Plaintiff :  
vs. : NO. \_\_\_\_\_  
Defendant :

## ASSIGNMENT OF WAGES

I, \_\_\_\_\_, state to the Court as follows:

1. I am the defendant in the above-captioned matter.
2. An attorney was appointed to represent me in the above-captioned matter.
3. I understand that under Iowa Code Section 815.9 I must pay all costs and fees incurred for legal assistance to the clerk of court.

4. I am not able to pay for all of the costs and fees incurred for legal assistance in the above-captioned matter within the time specified in Iowa Code §815.9.

5. I agree to assign my wages to pay said costs and fees. I am currently employed by  
Name of Employer

Address of Employer				
Street	City	State	Zip	

Employer Phone No. \_\_\_\_\_

6. I will notify the clerk of court within 10 days if I change employers.

Date \_\_\_\_\_ Signature\_\_\_\_\_

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**JUDGMENT AND ORDER FOR ASSIGNMENT OF INCOME**

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The matter of payment of the costs and fees incurred for defendant's legal assistance in the above-captioned matter comes before the court pursuant to Iowa Code Sections 815.9(8) and (9). The Court finds that the costs and fees incurred total \$ \_\_\_\_\_; that judgment for costs and fees to be paid by defendant should be entered in the amount of \$ \_\_\_\_\_; and that defendant agrees to an assignment of his/her income to pay this amount.

IT IS THEREFORE ORDERED that judgment is entered against defendant in the amount of \$ \_\_\_\_\_ for costs and fees incurred for defendant's legal assistance in the above-captioned matter.

IT IS FURTHER ORDERED that an assignment of income is adjusted and entered against the defendant \_\_\_\_\_ to pay the costs and fees incurred for defendant's legal assistance.

IT IS FURTHER ORDERED that defendant's employer/income provider, \_\_\_\_\_, shall deduct from the defendant's income the sum of \$ \_\_\_\_\_ per month as payment for the costs and fees incurred for defendant's legal assistance.

Such deduction shall commence ten (10) working days after service of a copy of this Order upon the employer/income provider. The employer/income provider shall deliver a copy of this Order to the defendant \_\_\_\_\_ within one working day after receipt of the Order.

The employer/income provider shall transmit a check for the amount deducted to the following address:

Clerk of Court, \_\_\_\_\_ County Courthouse

\_\_\_\_\_

All sums remitted shall be sent to the above-mentioned location within ten (10) days from the date the defendant is paid and shall be labeled to identify the defendant by name and shall be further labeled by adding the following case number \_\_\_\_\_.

IT IS FURTHER ORDERED that, should the amount hereby assigned exceed fifty percent (50%) of the defendant's disposable net earnings in a given period, the employer/income provider shall withhold only fifty percent (50%) of the defendant's net earnings for that pay period, and shall transmit that amount to the clerk of court as ordered above.

IT IS FURTHER ORDERED that this assignment shall be binding on subsequent employers/income providers of the defendant.

IT IS FURTHER ORDERED that this order for income assignment shall remain in full force and effect until the judgment is paid in full, or until further order of this court.

The employer/income provider shall promptly notify the court when the defendant's employment terminates and shall provide the court with the defendant's last known address and the name and address of the defendant's new employer, if known.

IT IS FURTHER ORDERED that the employer/income provider maintain a record or accounting of amounts withheld under this Order and make the record available to defendant upon request.

Dated \_\_\_\_\_

\_\_\_\_\_  
JUDGE, \_\_\_\_\_ JUDICIAL DISTRICT OF IOWA