

<p>_____ _____ _____ _____ _____ _____ Petitioner, vs. _____ _____ Respondent. <input type="checkbox"/> _____ _____ _____</p>	<p>NO. _____</p> <p style="text-align: center;">§ 915.20A AFFIDAVIT REGARDING RETURN OF SERVICE</p>
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I, a sheriff or private process server, _____, swear that the address of the crime victim center (shelter), at which I served _____ and for which I completed the Return of Service for CSC# _____, on or about this ____ day of _____, year____, is located at the following address:

Pursuant to a request from the Child Support Recovery Unit (CSRU), I completed this additional affidavit to protect the location of a crime victim center because Iowa Code § 915.20A(2) states, "Under no circumstances shall the location of a crime victim center or the identity of the victim counselor be disclosed in any civil or criminal proceeding."

Dated this ____ day of _____, year _____.

Signature of Sheriff or Private Process Server and Official Title

State of Iowa
County of _____

This instrument was acknowledged before me on this ____ day of _____, year _____ by the signing of _____ (name of sheriff or private process server).

Notary Public in and for the State of Iowa