

IN THE IOWA DISTRICT COURT FOR _____ COUNTY

Petitioner,

vs.

Respondent.

No. _____

**STIPULATION ON
REGISTRATION OF SUPPORT ORDER**

NOW on this _____ day of _____, _____, this matter comes before the Court. The State of Iowa is represented by attorney _____.

The payor, _____,

- is represented by attorney, _____
- appears Pro Se (without an attorney)
- does not appear.

The payee, _____,

- is represented by attorney, _____
- appears Pro Se (without an attorney).
- does not appear

The payor consulted with an attorney or was given the opportunity to do so, and agreed to the terms in this document by signing below:

The payee consulted with an attorney or was given the opportunity to do so, and agreed to the terms in this document by signing below:

The payor and payee consulted with an attorney or were given the opportunity to do so, and agreed to the terms in this document by signing below:

The parties hereby stipulate and agree to the following terms, and request that the Stipulation be approved and entered as an order of the Court.

1. The Court has subject matter jurisdiction to register the out-of-state order(s) or agreement(s) listed in this document based on Iowa Code chapter 252K.

2. The Court has personal jurisdiction of the payee because the payee

- lives in Iowa.
- agreed to Iowa's jurisdiction.
- requested registration of the support order and waives any contest to personal jurisdiction.
- was personally served with notice in Iowa.
- submitted to the jurisdiction of the State of Iowa by consent in a record or by filing a responsive document having the effect of waiving any contest to personal jurisdiction.
- lived in Iowa with the named child(ren).
- lived in Iowa and provided prenatal expenses or support for the named child(ren).
- caused the named child(ren) to live in Iowa by the following direction or act:

engaged in at least one act of sexual intercourse in Iowa with the other parent of the named child(ren) and the child(ren) may have been conceived by that act of intercourse. asserted parentage of a child in the declaration of paternity registry maintained in this state by the Iowa Department of Public Health under Iowa Code section 144.12A or established paternity by affidavit under Iowa Code section 252A.3A.

has sufficient minimum contacts with the state of Iowa because: _____.

3. The Court has personal jurisdiction of the payor, because the payor

- lives in Iowa.
- requested registration of the support order and waives any contest to personal jurisdiction.
- was personally served with notice in Iowa.
- submitted to the jurisdiction of the State of Iowa by consent in a record or by filing a responsive document having the effect of waiving any contest to personal jurisdiction.
- lived in Iowa with the named child(ren).
- lived in Iowa and provided prenatal expenses or support for the named child(ren).
- caused the named child(ren) to live in Iowa by the following direction or act:

engaged in at least one act of sexual intercourse in Iowa with the other parent of the named child(ren) and the child(ren) may have been conceived by that act of intercourse.

asserted parentage of a child in the declaration of paternity registry maintained in this state

by the Iowa Department of Public Health under Iowa Code section 144.12A or established paternity by affidavit under Iowa Code section 252A.3A.

has sufficient minimum contacts with the state of Iowa because: _____.

4. The place of residence of the parties and the child(ren) is:

a. The payor lives in _____.

b. The payee lives in _____.

c. The child(ren) affected by the registered order(s) live in:

Child's Initials	Place of Residence
_____	_____
_____	_____
_____	_____
_____	_____

5. The Notice of Registration of Support Order(s) was served on the payor and payee as required by Iowa Code 252K.605.

6. The following support order(s) or foreign support agreements, which are filed in this action, have been properly registered and are enforceable in Iowa based on Iowa Code sections 252K.601 *et seq.* or 252K.706, *et seq.* The contesting party did not establish a defense to the validity or enforcement of the order(s).

Issuing Tribunal	Docket Number	Effective Date	Support Amount	Arrearages
_____	_____	_____	\$ _____.00 per _____	\$ _____
_____	_____	_____	\$ _____.00 per _____	\$ _____
_____	_____	_____	\$ _____.00 per _____	\$ _____
_____	_____	_____	\$ _____.00 per _____	\$ _____
_____	_____	_____	\$ _____.00 per _____	\$ _____

Issuing Tribunal	Docket Number	Effective Date	Support Amount
_____	_____	_____	\$ _____.00 per _____
_____	_____	_____	\$ _____.00 per _____
_____	_____	_____	\$ _____.00 per _____
_____	_____	_____	\$ _____.00 per _____
_____	_____	_____	\$ _____.00 per _____

7. The Court reserves judgment on arrears due under order(s) or foreign support agreement(s) not listed in the table. The Court also reserves judgment on all other support issues, including but not limited to, unreimbursed medical expenses. At the time the Registration Statement or Letter of Transmittal Requesting Registration was filed, the State of Iowa did not have enough information to address other support issues.

8. The Court reserves judgment on the amount of the past interest, if any, due on the unpaid support judgment(s).

9. The payor owes arrears under the registered order(s) or foreign support agreement(s) listed in the table above. A judgment is now entered for those arrears in the amount of \$_____ as of _____. The arrears include interest. do not include interest. The Court reserves judgment on the amount of the past interest, if any, due on the unpaid support judgment(s). The amount does not include arrears due under orders, including Iowa orders, or foreign support agreement(s) not listed in the table.

10. Under Iowa Code sections 252K.607(2) and 252K.709, the uncontested portion of the order(s) or foreign support agreement(s) is enforceable. Because the nonregistering party only presented evidence that may establish a partial defense, the State of Iowa will begin immediate enforcement of:

Child support in the amount of _____ per _____.

Health insurance.

Periodic medical support of _____ per _____.

Arrearages in the amount of _____ to be paid at the rate of _____ per _____. This amount does not include arrears due under orders, including Iowa orders, or foreign support agreements not listed in the table. The Court reserves

judgment on arrears due under orders foreign support agreements not listed in the table.

Alimony in the amount of _____ per _____.

Other: _____ in the amount of _____ per _____

11. All support payments for the registered order(s) or foreign support agreement(s) shall be payable to the Collection Services Center, P.O. Box 9125, Des Moines, Iowa 50306-9125, and in no other manner. Each payment must list the payor, payee, Iowa District Court Number and the Collection Services Center case account number: # _____. Any payment sent directly to the above named caretaker or the child(ren) by a Respondent is considered a gift and not credited to the support ordered. Credit will also not be given for gifts or the purchase of food, clothing, or other physical property.
12. CSRU does not seek to recover costs advanced in this proceeding, including service fees, and none are assessed.

NOTICES

1. The income of the payor is subject to immediate income withholding, under Iowa Code section 252D.8(1). Until the income provider withholds the required amount of support, the payor shall send payment to the Collection Services Center.
2. The installment payment method does not prevent the Child Support Recovery Unit (the Unit) from collecting the accrued support and/or any delinquent support by any means provided by law. This may include: Income withholding, Garnishment, Liens, Income tax setoff, Levy of account at financial institutions, and Sanctions of licenses and passports. Based on Iowa Code Chapter 252D, when payments become delinquent in an amount equal to the payment for one month, the Court or the Unit may order the withholding of support. The amount is set in accordance with 441 IAC chapter 98, division II. The Unit may send an administrative levy on the payor's financial institutions under Iowa Code Chapter 252I.
3. If this case is referred to a collection entity to collect support arrears, based on Iowa Code section 252B.23, a surcharge may be assessed to the payor. Information may be provided to a collection entity for purposes of administering and enforcing the surcharge. The amount of the surcharge is a percentage of the amount in arrears.
4. According to Iowa Code section 598.22B, the payor, payee, and any necessary third party shall provide the Unit with written information about the person's identity, social security number, residential, mailing, and email addresses, telephone number, driver's license number, and the name, address, and telephone number of the party's current employer or other source of income and keep the Unit informed of any changes. Both parents shall also provide the Unit information about health insurance that is available, including health insurance policy information-
5. THIS CASE HAS BEEN FILED IN A COUNTY THAT UTILIZES ELECTRONIC FILING. Therefore, unless you obtain an exemption from eFiling from the court, you must file all documents on this case electronically. You must register to eFile through the Iowa Judicial branch website at <https://www.iowacourts.state.ia.us/EFile> and obtain a log in and password for the purposes of filing and viewing documents on your case and of receiving service and notices from the court.

FOR GENERAL RULES AND INFORMATION ON ELECTRONIC FILING, REFER TO THE IOWA COURT RULES CHAPTER 16 PERTAINING TO THE USE OF THE ELECTRONIC DOCUMENT MANAGEMENT SYSTEM, also available on the Iowa Judicial branch website. FOR COURT RULES ON THE PROTECTION OF PERSONAL PRIVACY IN COURT FILINGS, REFER TO DIVISION VI OF IOWA COURT RULES CHAPTER 16.

The following section is to be completed only if this order is entered by agreement of the parties:

Payor's Declaration:

I, _____, the payor, state that I have been advised of my right to have legal counsel of my choice in these proceedings. I understand that the attorney for the State is not acting as my counsel in this matter. I freely enter into and approve the above stipulation.

Payor Attorney for Payor (optional)

Date: _____ Date: _____

I, _____, the payee, state that I have been advised of my right to have legal counsel of my choice in these proceedings. I understand that the attorney for the State is not acting as my counsel in this matter. I freely enter into and approve the above stipulation.

Payee Attorney for Payee (optional)

Date: _____ Date: _____

State of Iowa

Date: _____

Copies hand delivered to _____

Mailing copies to _____