**In the Iowa District Court for {{ aff\_county }}**

|  |  |
| --- | --- |
| **{{ aff\_plaintiff }},**  **Plaintiff/Petitioner,**  **vs.**  **{{ aff\_def\_name }},**  **Defendant/Respondent.** | **No. {{ aff\_case\_num }}**  **Financial Affidavit and Request for Reasonable Ability to Pay Determination for Category B Restitution** |

**In support of my request for a determination of my reasonable ability to pay Category B restitution ordered in this case, and under penalty of perjury, I provide as follows:**

1. My date of birth is {{ aff\_dob }}.

{% if aff\_priors %}

1. I have prior convictions, in Iowa or elsewhere, that require me to pay fines, penalties, victim restitution, or other monetary amounts that I have not paid in full. {{ aff\_other\_restitution\_details }}  
     
   {% else %}I do not have any prior convictions in Iowa or elsewhere that require me to pay fines, penalties, victim restitution, or other monetary amounts that I have not paid in full.

{% endif %}

1. The total amount of restitution owed in this case is ${{ aff\_rest\_total }}.
2. The highest level of education I have attained is {{ aff\_highest\_ed }}.

{% if aff\_employed %}

1. I am employed at {{ aff\_cemployer }} and have been employed there since {{ aff\_current\_employment\_start }}. I work {{ aff\_lt\_fulltime }} hours.

{% else %}

I am not currently employed.

{% endif %}

{% if aff\_lt\_fulltime != 'Full-Time' %}

1. {{ aff\_pt\_hours }}.

{% endif %}

{% if aff\_employed %}

1. My current take-home pay is {{ aff\_takehome\_pay }} which is paid {{ aff\_takehome\_freq }}

{% endif %}

{% if aff\_other\_income | length > 1 %}

1. My other income includes: {{ aff\_other\_income }}

{% endif %}

1. Amounts I owe monthly include: {{ aff\_monthly\_debts }}
2. My other monthly expenses include {{ aff\_monthly\_expenses }}

{% if aff\_dependents > 0 %}

1. I have {{ aff\_dependents }} dependents or family members who are supported by or live with me.

{% endif %}

{% if aff\_unpaid\_judgments %}

1. I have unpaid judgments against me and the total amount owed is {{ aff\_unpaid\_judgments\_amount }}.

{% endif %}

1. {% if aff\_garnish %} My wages are being garnished. {{ aff\_garnish\_details }}

{% else %}My wages are not being garnished. {{ aff\_garnish\_details }}

{% endif %}

{% if aff\_assets | length > 1 %}

1. All of my assets worth more than $100 are: {{ aff\_assets }}

{% endif %}

1. All of my outstanding debts are: {{ aff\_outstanding\_debts }}.

{% if aff\_future\_windfall %}

1. I expect to receive some significant property or money in the near future. Specifically, {{ aff\_windfall\_details }}.

{% endif %}

{% if aff\_personal\_circumstances | length >1 %}

1. Other personal or family circumstances, including physical or mental health issues, that affect my ability to repay the restitution ordered in this case include: {{ aff\_personal\_circumstances }}

{% endif %}

{% if aff\_additional\_information | length >1 %}

1. Additional information I think is important for the Court to know in determining my ability to pay the Category B restitution ordered in this case includes: {{ aff\_additional\_information }}

{% endif %}

**By making this financial affidavit, I am asking the court to determine that I am not able to reasonably make payments toward the full amount of Category B restitution ordered in this case. I understand that if I fail to complete a financial affidavit, I waive any claim regarding my reasonable ability to pay.**

{% if aff\_atty\_name | length >1 %}

**Attorney Help**

An attorney helped me prepare or fill in this Financial Affidavit. Their information is as follows:

|  |  |  |
| --- | --- | --- |
|  | *Name of attorney or organization:* | {{ aff\_atty\_name }} |
|  | *Business Address:* | {{ aff\_atty\_street }} |
|  | *City:* | {{ aff\_atty\_city }} |
|  | *State:* | {{ aff\_atty\_state }} |
|  | *ZIP Code:* | {{ aff\_atty\_zip }} |
|  | *Phone Number* | {{ aff\_atty\_phone }} |
|  | *Fax Number* | {{ aff\_atty\_fax }} |
|  | *Email Address* | {{ aff\_atty\_email }} |

{% endif %}

**Oath and signature**

I, {{ aff\_def\_name }}, have read this financial affidavit, and I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the information I have provided in this financial affidavit is complete, true, and correct to the best of my knowledge.

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| --- | --- |
|  |  |
|  | *Defendant's Signature\** |

|  |  |  |
| --- | --- | --- |
|  | *Mailing Address:* | {{ aff\_def\_street }} |
|  | *City:* | {{ aff\_def\_city }} |
|  | *State:* | {{ aff\_def\_state }} |
|  | *ZIP Code:* | {{ aff\_def\_zip }} |
|  | *Phone Number* | {{ aff\_def\_phone }} |
|  | *Fax Number* | {{ aff\_def\_fax }} |
|  | *Email Address* | {{ aff\_def\_email }} |

*\* You must handwrite your signature on this form, scan it, and then file electronically.*