**IN THE IOWA DISTRICT COURT FOR POLK COUNTY**

**JUVENILE DIVISON**

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| --- | --- |
| **IN THE INTEREST OF****A CHILD/REN.** | **JUVENILE NO.** **MOTION TO CLOSE CASE AND TERMINATE JUVENILE COURT JURISDICTION** |

COMES NOW, the State, by and through Assistant Polk County Attorney, , and requests that the Court close the Child’s juvenile case. In support of this request, the undersigned states the following:

1.
2. All parties are in agreement.

WHEREFORE, the State respectfully requests that this Court grant the State’s Motion.

**Respectfully Submitted,**

**Kimberly Graham**

**Polk County Attorney**

/s/ *(Name)* \_\_

(Name)

Assistant Polk County Attorney

Juvenile Division

222 5th Avenue

Des Moines, IA 50309