



**Washington County Clerk of Circuit Court  
Family Division**

**Paternity Acknowledgment Action – Wis. Stats. 767.805**

Revised: February 2024

These forms are intended for use by a parent who is looking to initiate a court action concerning custody, placement, and/or support where both parents have jointly signed and filed with the State a statement acknowledging paternity. These instructions are not to be used to start an action to establish paternity in cases where there is not already an Acknowledgment of Paternity filed with the State.

- A packet of forms is available from the Clerk of Circuit Court for a fee.

You may receive assistance in filling out these forms by attending the Family Law Assistance Program (FLAP) which is held on certain Tuesdays from 12:00pm to 1:00pm in the Washington County Justice Center. Contact the Family Department in the Washington County Clerk of Courts for further information at (262)365-5135 or at:

[https://www.washcowisco.gov/departments/clerk\\_of\\_circuit\\_court/family\\_court](https://www.washcowisco.gov/departments/clerk_of_circuit_court/family_court)

There is a filing fee for this action. If you are requesting child support, the filing fee is \$194.50. If you are not requesting child support, the filing fee is \$184.50. Contact the Washington County Clerk of Courts for questions associated with the filing fees of this action. If you are indigent and cannot afford to pay the filing fee, you may submit a Petition for Waiver of Fees and Costs - Affidavit of Indigency ([form CV-410A](#)) for the court's consideration.

**This packet includes the following forms:**

1. Summons - Paternity Acknowledgment Under Wis. Stat. § 767.805 (FA2119) with following required attachments:
  - a. Petition for Custody, Placement and Child Support - Paternity Acknowledgment Under Wis. Stat. § 767.805 (FA2120)
  - b. Uniform Child Custody Jurisdiction Act Affidavit (GF-150)
  - c. How to Get a Physical Placement (visitation) Schedule (FA2123)
  - d. Wisconsin Child Support Percentage of Income Standards and Statutory Factors Court May Consider
2. Confidential Petition Addendum (GF-179)
3. Financial Disclosure Statement (2 are needed) (FA-4139V)
4. Admission of Service Form (FA-4119V)
5. Wisconsin Service Instruction Packet (FA-5000V)

**PLEASE NOTE: This Guideline is provided as a public service and is not intended to be legal advice. If you have any questions about what type of case you should file or how to complete the forms, please contact an attorney. Clerk of Court staff members cannot give legal advice.**

Phone: (262) 365-5137  
Fax: (262) 306-2224  
Office Website:  
[www.washcowisco.gov](http://www.washcowisco.gov)

Clerk of Circuit Court – Family Division  
Washington County Courthouse  
484 Rolfs Avenue  
West Bend, WI 53090

Justice Center, Room 3151  
Office Hours:  
Monday – Friday  
8:00 a.m. – 4:30 p.m.



Washington County Clerk of Circuit Court  
Family Division

**Paternity Acknowledgment Action – Wis. Stats. 767.805**

Revised: February 2024

FORM	LINK
Summons – Paternity Acknowledgment (FA2119)	Contact the Washington County Clerk of Courts Office
Petition for Custody, Placement and Child Support – Paternity (FA2120)	Contact the Washington County Clerk of Courts Office
Uniform Child Custody Jurisdiction Act Affidavit (GF-150)	<a href="#">UCCJEA Affidavit - Wisconsin Court Form GF-150</a>
How to Get a Physical Placement (visitation) Scheduled (FA2123)	Contact the Washington County Clerk of Courts Office
Wisconsin Child Support Percentage of Income Standards and Statutory Factors Court May Consider	Contact the Washington County Clerk of Courts Office
Confidential Petition Addendum (GF-179)	<a href="#">Confidential Petition Addendum - Wisconsin Court Form GF-179</a>
Financial Disclosure Statements (2 are needed) (FA-4139A)	<a href="#">Financial Disclosure Statement - Wisconsin Court Form FA-4139V</a>
Service Instruction Packet (FA-5000V)	<a href="#">Service Instruction Packet - Wisconsin Court Form FA-5000V</a>
Admission of Service (FA-4119V)	<a href="#">Admission of Service Form - Wisconsin Court Form FA-4119V</a>

**Summons Instructions (form FA2119):**

**Page 1:**

**CAPTION:**

- In the caption at the top of the page, enter the initials of the child(ren) who is/are the subject of the action next to “In Re the Voluntary Paternity Acknowledgment of: \_\_\_\_\_”
- Print your name on the line above "Petitioner." Print the other parent's name on the line above "Respondent" along with the appropriate address information of each party.

**BODY:**

- Utilize the assistance of the Washington County Clerk of Courts to obtain the date, time, location, and presiding official information for your case.

**PLEASE NOTE:** This Guideline is provided as a public service and is not intended to be legal advice. If you have any questions about what type of case you should file or how to complete the forms, please contact an attorney. Clerk of Court staff members cannot give legal advice.

Phone: (262) 365-5137  
Fax: (262) 306-2224  
Office Website:  
[www.washcowisconsin.gov](http://www.washcowisconsin.gov)

Clerk of Circuit Court – Family Division  
Washington County Courthouse  
484 Rolfs Avenue  
West Bend, WI 53090

Justice Center, Room 3151  
Office Hours:  
Monday – Friday  
8:00 a.m. – 4:30 p.m.



Washington County Clerk of Circuit Court  
Family Division

**Paternity Acknowledgment Action – Wis. Stats. 767.805**

Revised: February 2024

**Page 2:**

- At the top of the page, print your name on the first blank line. Print your address on the following lines.
  - This is the address where the Respondent should send their answer to you as the Petitioner of the action.

**Page 4:**

- Date, sign, print your name, and enter your address and phone number.

**Petition for Custody, Placement, and Child Support Instructions (Form FA2120):**

**Page 1:**

**CAPTION:**

- In the caption at the top of the page, enter the initials of the child(ren) who is/are the subject of the action next to "In Re the Voluntary Paternity Acknowledgment of: \_\_\_\_\_"
- Print your name on the line above "Petitioner." Print the other parent's name on the line above "Respondent" along with the appropriate address information of each party.

**BODY:**

- Paragraph 1:
  - In the first sentence, fill in your name after "I." Print the child's name in the first blank on the second line along with the birthdate in the next blank. In the last blank of the first paragraph, fill in the date on which the paternity acknowledgment form was filed with the State.
  - Use the additional indented paragraphs if there are any additional children between the parties that you are looking to establish orders on.
- Paragraph 2:
  - List the parent with whom the child(ren) is/are currently living in the first blank.
  - In the second blank, enter your name after "Petitioner". Enter your birthdate in the second blank. Enter your address in the third blank. Enter your occupation in the fourth blank.

**Page 2:**

- Paragraph 3:
  - In the first blank, enter the other parent's name after "Respondent." Enter the other parent's birthdate in the second blank. Enter the other parent's address in the third blank. Enter the other parent's occupation in the fourth blank.

**PLEASE NOTE: This Guideline is provided as a public service and is not intended to be legal advice. If you have any questions about what type of case you should file or how to complete the forms, please contact an attorney. Clerk of Court staff members cannot give legal advice.**

Phone: (262) 365-5137  
Fax: (262) 306-2224  
Office Website:  
[www.washcowisconsin.gov](http://www.washcowisconsin.gov)

Clerk of Circuit Court – Family Division  
Washington County Courthouse  
484 Rolfs Avenue  
West Bend, WI 53090

Justice Center, Room 3151  
Office Hours:  
Monday – Friday  
8:00 a.m. – 4:30 p.m.



Washington County Clerk of Circuit Court  
Family Division

**Paternity Acknowledgment Action – Wis. Stats. 767.805**

Revised: February 2024

- Last paragraph:
  - In the last paragraph which starts out "The Petitioner requests the following relief," check the boxes for any issues want addressed by the court.
- Signature section:
  - Do not sign document until able to do so before a notary. Date, sign, print your name, and enter your address and phone number. This document **MUST** be notarized.

**Service Required:**

You must serve the other party within 90 days of the date the case is filed. Service may be accomplished in various ways. The following is a link to the Wisconsin Courts Service Instruction Packet: [Service Instruction Packet - Wisconsin Court Form FA-5000V](#).

The following is a link to the Wisconsin Admission of Service Form: [Admission of Service Form - Wisconsin Court Form FA-4119V](#)

You may seek additional assistance regarding service through consulting with or retaining an attorney, attending the Washington County Family Law Assistance Program or reviewing the above links regarding the procedure and requirements for service.

**BEFORE FILING**, make sure you have the correct number of copies of the Summons, Petition (*must be notarized*), attachment of the Wisconsin Child Support Percentage of Income Standards and Statutory Factors Court May Consider, Uniform Child Custody Jurisdiction Act Affidavit, Confidential Petition Addendum, and Financial Disclosure Statements.

**PLEASE NOTE:** This Guideline is provided as a public service and is not intended to be legal advice. If you have any questions about what type of case you should file or how to complete the forms, please contact an attorney. Clerk of Court staff members cannot give legal advice.

Phone: (262) 365-5137  
Fax: (262) 306-2224  
Office Website:  
[www.washcowisconsin.gov](http://www.washcowisconsin.gov)

Clerk of Circuit Court – Family Division  
Washington County Courthouse  
484 Rolfs Avenue  
West Bend, WI 53090

Justice Center, Room 3151  
Office Hours:  
Monday – Friday  
8:00 a.m. – 4:30 p.m.

In Re the Voluntary Paternity

**SUMMONS**

Acknowledgment of: \_\_\_\_\_

**Court Case:  
Paternity Acknowledgment Under  
Wis. Stat. § 767.805  
(40503)**

\_\_\_\_\_,  
Petitioner,

\_\_\_\_\_  
\_\_\_\_\_

Petitioner's address and date of birth

Case Number: \_\_\_\_\_

vs.

\_\_\_\_\_,  
Respondent.

\_\_\_\_\_  
\_\_\_\_\_

Respondent's address and date of birth

**TO THE PERSON NAMED ABOVE AS RESPONDENT:**

You are notified that the Petitioner named above has filed a legal action against you. The petition, which is attached, states the nature and basis of the legal action.

You must appear to answer this action:

Date and Time: \_\_\_\_\_

Presiding Official: \_\_\_\_\_

Address: Washington County Justice Center, Room \_\_\_\_\_  
484 Rolfs Avenue  
West Bend, WI 53090

If you do not appear, the court will enter a default judgment and may issue a warrant for your arrest. You may have an attorney help or represent you.

Within twenty (20) days of receiving this summons, you must respond with a written answer, as that term is used in Chapter 802 of the Wisconsin Statutes, to the petition. The court may reject or disregard any answer that does not follow the requirements of the statutes. The answer must be sent or delivered to the court, whose address is:

Washington County Clerk of Courts  
484 Rolfs Avenue  
West Bend, WI 53090

and

\_\_\_\_\_, the Petitioner, whose address is:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you do not provide a proper answer within twenty (20) days, the court may grant judgment against you for the award of money or other legal action requested in the petition, and you may lose your right to object to anything that is or may be incorrect in the petition. A judgment may be enforced as provided by law. A judgment awarding money may become a lien against any real estate you own now or in the future, and may also be enforced by garnishment or seizure of property.

As required by Wis. Stat. §767.215(2m)(a)(2), accompanying this Summons will be a document setting forth the percentage standard for child support established by the Department of Workforce Development under § 49.22(9), Stats, and listing the factors that a court may consider for modification of that standard under § 767.511(1m), Stats.

You are hereby notified that if you and the Petitioner have any minor children, violation of the following criminal statute is punishable by a fine not to exceed \$25,000 or imprisonment not to exceed 12 years and 6 months, or both (Class F felony); or by a fine not to exceed \$10,000 or imprisonment not to exceed 3 years and 6 months, or both (Class I felony):

Wis. Stat. § 948.31 Interference with custody by parent or others.

(1)

(a) In this subsection, "legal custodian of a child" means:

1. A parent or other person having legal custody of the child under an order or judgment in an action for divorce, legal separation, annulment, child custody, paternity, guardianship or habeas corpus.
2. The department of children and families or the department of corrections or any person, county department under s. 46.215, 46.22, or 46.23, or licensed child welfare agency, if custody or supervision of the child has been transferred under ch. 48 or 938 to that department, person, or agency.

(b) Except as provided under chs. 48 and 938, whoever intentionally causes a child to leave, takes a child away or withholds a child for more than 12 hours beyond the court-approved period of physical placement or visitation period from a legal custodian with intent to deprive the custodian of his or her custody rights without the consent of the custodian is guilty of a Class F felony. This paragraph is not applicable if the court has entered an order authorizing the person to so take or withhold the child. The fact that joint legal custody has been awarded to both parents by a court does not preclude a court from finding that one parent has committed a violation of this paragraph.

(2) Whoever causes a child to leave, takes a child away or withholds a child for more than 12 hours from the child's parents or, in the case of a nonmarital child whose parents do not subsequently intermarry under s. 767.803, from the child's mother or, if he has been granted legal custody, the child's father, without the consent of the parents, the mother or the father with legal custody, is guilty

of a Class I felony. This subsection is not applicable if legal custody has been granted by court order to the person taking or withholding the child.

(3) Any parent, or any person acting pursuant to directions from the parent, who does any of the following is guilty of a Class F felony:

(a) Intentionally conceals a child from the child's other parent.

(b) After being served with process in an action affecting the family but prior to the issuance of a temporary or final order determining child custody rights, takes the child or causes the child to leave with intent to deprive the other parent of physical custody as defined in s. 822.02 (14).

(c) After issuance of a temporary or final order specifying joint legal custody rights and periods of physical placement, takes a child from or causes a child to leave the other parent in violation of the order or withholds a child for more than 12 hours beyond the court-approved period of physical placement or visitation period.

(4)

(a) It is an affirmative defense to prosecution for violation of this section if the action:

1. Is taken by a parent or by a person authorized by a parent to protect his or her child in a situation in which the parent or authorized person reasonably believes that there is a threat of physical harm or sexual assault to the child;
2. Is taken by a parent fleeing in a situation in which the parent reasonably believes that there is a threat of physical harm or sexual assault to himself or herself;
3. Is consented to by the other parent or any other person or agency having legal custody of the child; or
4. Is otherwise authorized by law.

(b) A defendant who raises an affirmative defense has the burden of proving the defense by a preponderance of the evidence.

(5) The venue of an action under this section is prescribed in s. 971.19 (8).

(6) In addition to any other penalties provided for violation of this section, a court may order a violator to pay restitution, regardless of whether the violator is placed on probation under s. 973.09, to provide reimbursement for any reasonable expenses incurred by any person or any governmental entity in locating and returning the child. Any such amounts paid by the violator shall be paid to the person or governmental entity which incurred the expense on a prorated basis. Upon the application of any interested party, the court shall hold an evidentiary hearing to determine the amount of reasonable expenses.

You are also notified that, under Wis. Stat. §767.105(2), you may request, and may have to pay for, the following written information from the Court Commissioner:

1. The procedure for obtaining a judgment or order in this action.
2. The major issues usually addressed in such an action.
3. Community resources and family court counseling services available to assist the parties.
4. The procedure for setting, modifying, and enforcing child support awards or modifying and enforcing legal custody or physical placement judgments or orders.
5. A copy of the statutory provisions in Chapter 767 generally pertinent to this action for inspection or purchase.

You are further notified of the availability, upon request of the Court Commissioner and with or without charge, of written information on the procedures in this action and any community resources and counseling services available to assist the parties.

Any person who signs a Voluntary Paternity Acknowledgement may request that the acknowledgment be rescinded by filing the appropriate form with the State Registrar. The form must be filed with the State Registrar before the day that court makes any order affecting the family, or within sixty (60) days of the filing of the Voluntary Paternity Acknowledgment with the State Registrar, whichever comes first.

The Washington County Clerk of Court is an equal opportunity service provider. If you need assistance to access services or need material in an alternate format, please call (262)335-4341.

**Attached to this document is an affidavit concerning custody which is given in compliance with Wis. Stats. § 822.29.**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

By: \_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Full Name – Printed

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number



In Re the Voluntary Paternity  
Acknowledgment of: \_\_\_\_\_

**PETITION FOR CUSTODY,  
PLACEMENT, AND CHILD  
SUPPORT**

\_\_\_\_\_,  
Petitioner,

**Court Case:  
Paternity Acknowledgment Under  
Wis. Stat. § 767.805  
(40503)**

\_\_\_\_\_  
\_\_\_\_\_  
Petitioner's address and date of birth

Case Number: \_\_\_\_\_

vs.

\_\_\_\_\_,  
Respondent.

\_\_\_\_\_  
\_\_\_\_\_  
Respondent's address and date of birth

I, \_\_\_\_\_, am the parent of the following child:  
\_\_\_\_\_, with a birthdate of: \_\_\_\_\_, based on a signed  
acknowledgment filed with the State Registrar under Wis. Stat. § 69.15(3)(b)(3), on  
\_\_\_\_\_. Upon information and belief, such acknowledgment has not been  
timely rescinded.

*For additional children only:*

I, \_\_\_\_\_, am the parent of the following child:  
\_\_\_\_\_, with a birthdate of: \_\_\_\_\_, based on a signed  
acknowledgment filed with the State Registrar under Wis. Stat. § 69.15(3)(b)(3), on  
\_\_\_\_\_. Upon information and belief, such acknowledgment has not  
been timely rescinded.

I, \_\_\_\_\_, am the parent of the following child:  
\_\_\_\_\_, with a birthdate of: \_\_\_\_\_, based on a signed  
acknowledgment filed with the State Registrar under Wis. Stat. § 69.15(3)(b)(3), on  
\_\_\_\_\_. Upon information and belief, such acknowledgment has not  
been timely rescinded.

The child(ren) is/are now residing with \_\_\_\_\_ (parent's name).  
I, the Petitioner, \_\_\_\_\_, birthdate of: \_\_\_\_\_, resides  
at: \_\_\_\_\_ (address). The Petitioner's  
occupation is: \_\_\_\_\_.

The Respondent, \_\_\_\_\_, birthdate of: \_\_\_\_\_, resides at: \_\_\_\_\_ (address). The Respondent's occupation is: \_\_\_\_\_.

Upon information and belief, no other action for custody, placement and support of the child(ren) has been commenced by either of the parents or is pending in any other court or before any judge in this state or elsewhere.

Upon information and belief, the parents have not entered into any written agreement as to custody, placement and support for the child(ren).

The parties were never married.

The Petitioner requests the following relief: *(Check the boxes for any provisions you want addressed in this action)*

- An order determining custody and placement,
- An order for child support,
- An order for health care expenses and insurance which may include: enrollment in a private, comprehensive, accessible and reasonably-priced health care plan; a contribution toward payment for such a plan; future coverage if it becomes available; and responsibility for non-covered expenses,
- An order for birth expenses of the child(ren) and mother,
- An order establishing past (back) support,
- An order addressing tax exemption,
- The costs of this action,
- Any other relief authorized under Wisconsin Statutes.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

By: \_\_\_\_\_  
Signature of Petitioner  
\_\_\_\_\_  
Full Name – Printed  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Phone Number

Subscribed and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public/Court Official, State of Wisconsin  
My commission expires: \_\_\_\_\_.

Enter the name of the county in which you are filing this case.

STATE OF WISCONSIN, CIRCUIT COURT,  
\_\_\_\_\_ COUNTY

In the box to the right, enter the name of the case exactly as it is shown on other papers from the same case.

Case Caption: \_\_\_\_\_

Note: Enter case number if one has been assigned; otherwise, leave case number blank. The clerk will add this.

**Uniform Child Custody  
Jurisdiction and Enforcement  
Act Affidavit**

Case No. \_\_\_\_\_

Enter the name(s) of the child(ren) and their current address. If they currently reside at separate addresses, provide those addresses on an add'l sheet.

**UNDER OATH I STATE:**

1. The child(ren)'s name and present address are  
Name(s): \_\_\_\_\_  
Present Address: \_\_\_\_\_  See attached

Enter any previous addresses at which the child(ren) have lived in the past 5 years. Attach additional sheet, if necessary.

2. The child(ren) have lived in the following places over the last 5 years:  
\_\_\_\_\_  See attached

Enter the names and current address of each person with whom the child(ren) have lived in the last 5 years. If space is insufficient, or if individual children have lived at different address from others, attach an additional sheet and explain.

3. The name and present address of each person(s) with whom the child(ren) have lived over the last 5 years is  
Name: \_\_\_\_\_  
Present Address: \_\_\_\_\_  
Time Period: \_\_\_\_\_  
  
Name: \_\_\_\_\_  
Present Address: \_\_\_\_\_  
Time Period: \_\_\_\_\_  
  
Name: \_\_\_\_\_  
Present Address: \_\_\_\_\_  
Time Period: \_\_\_\_\_  
  
Name: \_\_\_\_\_  
Present Address: \_\_\_\_\_  
Time Period: \_\_\_\_\_  See attached

Check yes or no. If yes, enter the name of the court, the case number assigned to it, and the date the court order was entered. Attach an additional sheet, if necessary.

4. I have participated as a party, witness or in any other capacity in any other proceeding concerning the custody, physical placement, or visitation with the child(ren).  
 Yes  No If Yes, identify court, case number and date of any determination:  
\_\_\_\_\_  See attached

Check yes or no. If yes, enter the name of the court, the case number assigned to it, and the nature of the case (that is, what the case was about).

5. I have information of other proceedings concerning the child(ren) pending in Wisconsin or any other state, including enforcement, domestic violence, protective orders, termination of parental rights and adoption.  
 Yes  No If Yes, identify court, case number and nature of proceedings:  
\_\_\_\_\_

Check yes or no.

If yes, enter the name of and address of each person.

6. I know of persons not a party to this proceeding who have physical custody of the child(ren) or claim to have custody, physical placement, or visitation rights with respect to the child(ren).

Yes  No If Yes, give name and address of each person:

---

---

---

7. I understand that I have a duty to inform the court if I learn in the future of any proceeding concerning the child in Wisconsin or any other state.

**I declare under the penalty of false swearing that the information I have provided is true and accurate.**



Signature

Print or Type Name

Address

Email Address

Telephone Number

Date

State Bar No. (if any)

## **How to get a physical placement (visitation) schedule WASHINGTON COUNTY FAMILY COURT SERVICES**

If you and the other parent agree on a schedule with the exact times your child is going to spend with each of you, write up this agreement and both parents sign it. Bring this agreement with you to your court proceedings.

If you and the other parent cannot agree on a schedule, Family Court Mediation can help. The following outlines the Family Court Services mediation process.

### **MEDIATION PROCESS CHECKLIST**

- You will receive a letter directing you to complete the online Mediation Orientation.
- Review the online Orientation PowerPoint and, upon completion, answer the questions about the PowerPoint and submit those answers online. Complete the Mediation Intake forms online and submit those as well.
- After both parties have completed the online orientation, you will each receive a letter with your mediator's name and telephone number.
- Both of you must call the mediator to schedule an appointment for the first session.
- Gather any information that will help with scheduling (day-care hours, children's athletic schedules, school calendar, etc).
- Attend the first mediation session, which may be held in person, via video conference or telephone conference call.
- Schedule the next session(s), as needed.
- When/if you reach a parenting agreement:
  - The mediator will send the Parenting Agreement to you for you to sign and return or you can sign it at the mediation session if it is held in person.
  - Have your attorney review the Agreement before you sign it, if you have one.
  - If needed, schedule another session with the mediator to review any changes and sign the Agreement
  - You will receive a copy of the signed Agreement (signed by both parties and the mediator)
  - The signed Parenting Agreement will be e-filed with the court by the mediator along with a Response to Court indicating an agreement was reached.
  - If your case is an open/pending divorce, a hearing will be scheduled to review and approve your Agreement. If your case is post-judgment, the mediator will draft a Mediation Agreement and Order for your signatures and submit it to the court.
  - if you reach a partial agreement, the process is the same as above.
  - The Partial Agreement will be e-filed.
  - Remaining issues will be decided by the Court process.

If you do NOT reach an agreement:

- A Response to the Court will be e-filed advising that an agreement was not reached; *but*
  - It is your responsibility to start the next Court process after mediation has been unsuccessful and terminated. The Court process will not automatically begin until you start it.

A volunteer at the Family Law Assistance Program or clerk at the Clerk of Courts can help you get the correct forms for this process (ie: Motion, Order to Show Cause).

If you would like to start mediation or have questions, please call the Family Department at (262)365-5135.

Additional information can be found on Washington County's website: [www.washcowisco.gov](http://www.washcowisco.gov)

Click on Departments, Clerk of Circuit Courts, and scroll down to Family Court.

**WISCONSIN DEPARTMENT OF CHILDREN AND FAMILIES  
CHILD SUPPORT STANDARD -- CHILD SUPPORT GUIDELINES**

**AUTHORITY AND PURPOSE**

Wis. Stats. Sec. 49.22(9) requires the Department to adopt and publish a standard, based upon shared placement, percentage of the gross income and assets of either or both parents, to be used by courts in determining child support obligations. Chapter DCF 150 of the Wisconsin Administrative Code establishes Wisconsin's standard guidelines for child support. It is based upon the principle that the child's standard of living should, to the degree possible, be the same as if the child's parents were living together.

Chapter DCF 150 defines the income upon which the support obligation is based, and sets formulas for calculating child support including the percentages of income for computing the support obligation based upon a number of children. It also explains optional procedures for adjusting the obligation when the payer has an obligation to support another family, or when the payer has particularly high or low income.

**APPLICABILITY**

The child support standard applies to any temporary and final order for child support, including child support stipulations agreed to by both parents and modifications of existing child support orders.

**DEFINITION OF INCOME AND ASSETS**

Chapter DCF 150 defines gross income as income from any source, whether or not it is reported or taxed under federal law. The income can be in the form of money, property, or services. Public assistance or child support received from previous marriages or business expenses which the court determines are reasonably necessary for the production of income or operation of a business are subtracted, and wages paid to dependent household member are added to determine "gross income available for child support."

The court may also determine that income may be "imputed" (assumed at a given level) based on earning capacity and/or assets, and that imputed income is added to the gross income for the calculation of the support obligation.

**SHARED PLACEMENT GUIDELINES**

This formula uses each parent's income and the amount of placement or equivalent care each has with the child(ren).

**THE PERCENTAGE STANDARD**

The percentages are:	17% for one child
	25% for two children
	29% for three children
	31% for four children
	34% for five or more children

Wisconsin Statutes require temporary and final support orders to be expressed as fixed sum in most situations.

For further details, refer to Chapter DCF 150 of the Wisconsin Administrative Code and Wisconsin Statute Chapter 767 Actions Affecting the Family. (Choose "Wisconsin Law" on <http://www.legis.state.wi.us> )

**Statutory Factors Courts May Consider In Determining Child Support Awards for  
Paternity, Divorce, or Legal Separation**

**§767.511, Child Support.**

(1 m) Upon request by a party, the court may modify the amount of child support payments determined under §767.511 (1j) if, after considering the following factors, the court finds by the greater weight of the credible evidence that use of the percentage standard is unfair to the child or to any of the parties:

(a) The financial resources of the child.

(b) The financial resources of both parents.

(bj) Maintenance received by either party.

(bp) The needs of each party in order to support himself or herself at a level equal to or greater than that established under 42 USC 9902 (2).

(bz) The needs of any person, other than the child, whom either party is legally obligated to support

(c) If the parties were married, the standard of living the child would have enjoyed had the marriage not ended in annulment, divorce or legal separation.

(d) The desirability that the custodian remain in the home as a full-time parent.

(e) The cost of day care if the custodian works outside the home, or the value of custodial services performed by the custodian if the custodian remains in the home.

(ej) The award of substantial periods of physical placement to both parents.

(em) Extraordinary travel expenses incurred in exercising the right to periods of physical placement under §767.41.

(f) The physical, mental and emotional health needs of the child, including any costs for health insurance as provided for under sub. (4m).

(g) The child's educational needs.

(h) The tax consequences to each party.

(hm) The best interests of the child.

(hs) The earning capacity of each parent, based on each parent's education, training and work experience and the availability of work in or near the parent's community.

(i) Any other factors which the court in each case determines are relevant.



Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

Enter the name of the county in which this case is filed.

**This form is used for family and paternity case types. Some information may not apply to your case.**

Enter the case number and child support IV-D KIDS number, if known.

**STATE OF WISCONSIN, CIRCUIT COURT,**  
 \_\_\_\_\_ **COUNTY**

**Petitioner/Joint Petitioner A:**  
 \_\_\_\_\_  
 Name (First, Middle and Last)

**Respondent/Joint Petitioner B:**  
 \_\_\_\_\_  
 Name (First, Middle and Last)

Case No. \_\_\_\_\_  
 IV-D KIDS Case No. \_\_\_\_\_

**Confidential Petition Addendum**

Enter the name, date of birth [month, day, year], and social security number of each party.

1. **Parties**
- A. Petitioner/Joint Petitioner A/Alleged Parent: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_ Phone No. \_\_\_\_\_
- B. Respondent/Joint Petitioner B/Alleged Parent: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_ Phone No. \_\_\_\_\_
- C. Other party: (if any) \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_ Phone No. \_\_\_\_\_
- See attached

Enter the name, date of birth [month, day, year], and social security number of each minor child. If there are no minor children, check none. Attach additional pages if necessary.

2. **Minor Child(ren) that we have together**
- A. The minor child(ren) of the other party and me (born or adopted) before or during the marriage/relationship are:  
 None
- | Name of Minor Child | Date of Birth | SS# |
|---------------------|---------------|-----|
|                     |               |     |
|                     |               |     |
|                     |               |     |
|                     |               |     |
|                     |               |     |
- See attached

- B. **Other Minor Child(ren)**  
 If this is a divorce or legal separation, list **other** minor child(ren) born to either party during this marriage, but not fathered by the other party:  
 None
- | Name of Minor Child | Date of Birth | SS# | Parent |
|---------------------|---------------|-----|--------|
|                     |               |     |        |
|                     |               |     |        |
|                     |               |     |        |
- See attached

The party(s) filing this addendum must sign and print your name and date the document.

▶ _____ Signature	▶ _____ Signature
_____	_____
Name Printed or Typed	Name Printed or Typed
_____	_____
Address	Address
_____	_____
Email Address Telephone Number	Email Address Telephone Number
_____	_____
Date State Bar No. (if any)	Date State Bar No. (if any)

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

**This form is available in Spanish.**  
<https://www.wicourts.gov/forms1/circuit/index.htm>  
*(Este formulario está disponible en español.)*

Enter the name of the county in which this case is filed.	<b>STATE OF WISCONSIN, CIRCUIT COURT,</b> _____ <b>COUNTY</b>
Enter the name of the Petitioner/Joint Petitioner A.	<b>Petitioner/Joint Petitioner A</b> _____
On the far right, check Petitioner/Joint Petitioner A or Respondent/Joint Petitioner B.	Name (First, Middle and Last) _____
Enter the name of the Respondent/Joint Petitioner B.	<b>Respondent/Joint Petitioner B</b> _____
Enter the case number.	Name (First, Middle and Last) _____

**Financial Disclosure Statement of**  
 **Petitioner/Joint Petitioner A**  
 **Respondent/Joint Petitioner B**  
 Case No. \_\_\_\_\_

This form must be filed with the court within the time period set by the court but no later than 90 DAYS after the service of the **Summons** and **Petition** on the Respondent/Joint Petitioner B or the filing of a **Joint Petition**. Failure by either party to complete and file this form or attachments as required will authorize the court to accept the statement of the other party as the basis for its decisions. **Deliberate failure to provide complete disclosure is perjury.**

**1. PROOF OF INCOME**

- Attach a statement reflecting income earned to date for the current year.
- Attach most recent W-2 Statement.

**2. GENERAL INFORMATION**

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Phone** [Day] \_\_\_\_\_ **Phone** [Evening] \_\_\_\_\_  
**Alternative Phone** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_  
**Occupation** \_\_\_\_\_

**Employer** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Payroll Office**  **Same as employer**  
**Address** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**3. MEMBERS OF YOUR HOUSEHOLD**

Enter the name and relationship of all people living in your household. Check yes or no to identify if they contribute to payment of household expenses.

I live alone.

	Name	Relationship	This person helps pay expenses	
			Yes	No
1.			<input type="checkbox"/>	<input type="checkbox"/>
2.			<input type="checkbox"/>	<input type="checkbox"/>
3.			<input type="checkbox"/>	<input type="checkbox"/>

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

4.			<input type="checkbox"/>	<input type="checkbox"/>
5.			<input type="checkbox"/>	<input type="checkbox"/>
6.			<input type="checkbox"/>	<input type="checkbox"/>
7.			<input type="checkbox"/>	<input type="checkbox"/>
8.			<input type="checkbox"/>	<input type="checkbox"/>

**4. MONTHLY INCOME**

Income from wages / salary is received: (check one)

**To calculate monthly gross income use the multiplier shown:**

- weekly -multiply weekly income by 4.33     every other week (bi-weekly) multiply bi-weekly income by 2.17  
 monthly     twice a month-multiply semi-monthly income by 2

<b>MONTHLY GROSS INCOME</b>	
1.	Gross <b>monthly</b> income (before taxes and deductions) from salary and wages, including commissions, allowances and overtime. (See above how to calculate.)
2.	Pensions and retirement funds received
3.	Social Security benefits received
4.	Disability and Unemployment Insurance received
5.	Public Assistance Funds received
6.	Interest and Dividends received
7.	Child Support and maintenance (spousal support) received from any prior marriage/relationship
8.	Rental payments received (from property you rent to others)
9.	Bonuses received
10.	Other sources of income received: (please specify)
11.	
12.	
13.	
<b>Total Gross Income (add lines 1-12)</b>	

<b>MONTHLY DEDUCTIONS</b>	
14.	Number of tax exemptions claimed
15.	Monthly federal income tax withheld
16.	Monthly state income tax withheld
17.	Social Security
18.	Medicare
19.	Medical insurance
20.	Other insurances
21.	Union or other dues
22.	Retirement or pension fund
23.	Savings plan
24.	Credit union
25.	Child support or spousal support payments
26.	Other deductions: (please specify)
27.	
28.	<b>Total Monthly Deductions (add lines 14 – 27)</b>
<b>MONTHLY NET INCOME (subtract line 28 from line 13)</b>	

**5. ANTICIPATED MONTHLY EXPENSES**

<b>My Monthly Expenses</b>	
1.	Rent or mortgage payment (primary residence)
2.	Real Estate Property taxes (residence)
3.	Repairs and maintenance (including maintenance of appliances and furnishings)
4.	Food (include eating out) and household supplies
5.	Utilities (electricity, heat, water, sewage, trash)

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

6.	Telephone (local, long distance & cellular)	
7.	Cable and Internet Services	
8.	Laundry and dry cleaning	
9.	Clothing and shoes	
10.	Medical, dental and prescription drug expenses (not covered by insurance)	
11.	Insurance (life, health, accident, auto, liability, disability, homeowner's or renter's-excluding insurance that is paid through payroll deductions)	
12.	Childcare (babysitting and day care)	
13.	Child support or spousal support payments (due to previous marriage or relationship) (Exclude payments made through payroll deductions)	
14.	School expenses (child and adult education)	
15.	Entertainment (include clubs, social obligations, travel, recreation)	
16.	Incidentals (grooming, tobacco, alcohol, gifts, holidays and special occasions)	
17.	Transportation (other than automobile)	
18.	Auto payments (loans/leases)	
19.	Auto expenses (gas, oil, repairs, maintenance)	
20.	Newspapers, magazines, books	
21.	Care and maintenance of pets (food, vet, grooming)	
22.	Payments to any dependents not living in your home and not included in a category above (including college age children)	
23.	Hobbies	
24.	Other taxes than those listed above (exclude payroll deductions)	
25.	Other expenses (include expenses of other real properties owned, professional services such as counseling and tax/legal advice, etc)	
	Other Monthly installment payments:	
26.	Mortgage (other than primary mortgage)	
27.	Other vehicle payments	
28.	Credit card debt (total minimum monthly payments)	
29.	Court ordered obligations	
30.	Student loans	
31.	Personal loans	
<b>TOTAL MONTHLY EXPENSES (Add lines 1-31)</b>		

**6. ASSETS: List ALL assets that you own individually and together with the other party without regard to how they have been or will be divided later**

If you do not have assets in an asset category, write "none" under the heading and enter "zero" in the estimated value column. If you need more space, please attach additional sheets.

A = Joint Petitioner A B = Joint Petitioner B      T = Together	Ownership or Title Held by			Current Possession			Amount Owed	Estimated Value Today
	A	B	T	A	B	T		
<b>Household Items</b>								
Household furniture & accessories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Household appliances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Kitchen equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
China, silver, crystal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

Jewelry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Clothing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Antiques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Art	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Electronic equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Sports equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Recreational vehicles, boats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Automobiles:</b> Year, Make, Model	<b>A</b>	<b>B</b>	<b>T</b>	<b>A</b>	<b>B</b>	<b>T</b>	<b>Amount Owed</b>	<b>Estimated Value Today</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Life Insurance</b> Name of Company & Policy #	<b>A</b>	<b>B</b>	<b>T</b>	<b>Beneficiary</b>			<b>Face Amount</b>	<b>Cash Value Today</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Business Interests</b> Name of Business & Address	<b>A</b>	<b>B</b>	<b>T</b>	<b>Type of Business</b>			<b>% of Ownership</b>	<b>Value MINUS Indebtedness</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

<b>Securities: Stocks, Bonds, Mutual Funds,            Commodity Accounts</b> Name of Company & # of shares	<b>Ownership or Title held by</b> A = Joint Petitioner A B = Joint Petitioner B T = Together					<b>Value            Today</b>
	A	B	T			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Pension, Retirement Accounts,            Deferred Compensation, 401K Plans, IRAs,            Profit Sharing, etc.</b> Name of Company & Type of Plan	A	B	T	% Vested if known	Date of Valuation	Value Today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Cash and Deposit Accounts            (Savings and Checking)</b> Name of Bank or Financial Institution	A	B	T	Type of Account	Account # Last 4 digits	Balance Today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Other Personal Property</b> Description of Asset	A	B	T	Type of Property	Value	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

Assets Acquired Description of Asset	Ownership			Acquired by			Date Acquired	Value Today	
	A = Joint Petitioner A B = Joint Petitioner B T = Together			G - Gift I - Inherited B - Before Marriage					
	A	B	T	G	I	B			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Real Estate</b>	<b>Parcel 1</b>			<b>Parcel 2</b>			<b>Parcel 3</b>		
Type of Property									
Address: Street, City, State									
Ownership/Title	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> T	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> T	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> T
Current Fair Market Value									
Current Mortgage Balance									
Other Liens									

**7. MEDICAL, HOMEOWNERS/RENTERS, AUTOMOBILE, OTHER INSURANCE**

What type of insurance policies do you have?

Name of Company, Group # & Policy #	A	B	T	Type of Insurance	Date Issued
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**8. DEBTS: List ALL debts that you owe individually and together with the other party without regard to who will be responsible for payment later.**

If there are additional DEBTS, please attach a separate sheet of paper with the creditor's name and address, the type of obligation, who pays (A, B, T) and the current balance.

Creditor's Name & Address	Type of Obligation	Who Currently Pays			Monthly Payment	Current Balance
		A	B	T		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**9. DISPOSAL OF ASSETS**

Did you dispose of any assets (sold, given away, or destroyed) in the 12 months before the case was filed?  
 Yes  No

If yes, complete chart below:

Property / Asset	Date of Disposal	Fair Market Value on Date of Disposal

**10. CURRENT LITIGATION**

Are you a party in any other lawsuit or litigation?  Yes  No  
 If yes, identify the lawsuit or litigation. \_\_\_\_\_

**11. BANKRUPTCY**

Have you ever filed for bankruptcy?  Yes  No  
 If yes, identify the following:  
 Type of filing \_\_\_\_\_  
 Date of filing \_\_\_\_\_  
 Current status \_\_\_\_\_

**12. DECLARATION**

I declare under the penalty of perjury that the above, including all attachments, are complete, true, and correct.

Sign and print your name.  
 Enter the date on which you signed your name.  
**Note:** This signature does not need to be notarized.

\_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Print or Type Name  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 Email Address Telephone Number  
 \_\_\_\_\_  
 Date State Bar No. (if any)



Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

**This form is available in Spanish.**  
<https://www.wicourts.gov/forms1/circuit/index.htm>  
*(Este formulario está disponible en español.)*

Enter the name of the county in which this case is filed.	<b>STATE OF WISCONSIN, CIRCUIT COURT,</b> _____ COUNTY
Enter the name of the Petitioner/Joint Petitioner A.	<b>Petitioner/Joint Petitioner A</b> _____
On the far right, check Petitioner/Joint Petitioner A or Respondent/Joint Petitioner B.	Name (First, Middle and Last) _____ and _____
Enter the name of the Respondent/Joint Petitioner B.	<b>Respondent/Joint Petitioner B</b> _____
Enter the case number.	Name (First, Middle and Last) _____

**Financial Disclosure Statement of**  
 **Petitioner/Joint Petitioner A**  
 **Respondent/Joint Petitioner B**  
 Case No. \_\_\_\_\_

This form must be filed with the court within the time period set by the court but no later than 90 DAYS after the service of the **Summons** and **Petition** on the Respondent/Joint Petitioner B or the filing of a **Joint Petition**. Failure by either party to complete and file this form or attachments as required will authorize the court to accept the statement of the other party as the basis for its decisions. **Deliberate failure to provide complete disclosure is perjury.**

**1. PROOF OF INCOME**

- Attach a statement reflecting income earned to date for the current year.
- Attach most recent W-2 Statement.

**2. GENERAL INFORMATION**

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Phone** [Day] \_\_\_\_\_ **Phone** [Evening] \_\_\_\_\_  
**Alternative Phone** \_\_\_\_\_ **Social Security Number** \_\_\_\_\_  
**Occupation** \_\_\_\_\_

**Employer** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Payroll Office**  **Same as employer**  
**Address** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**3. MEMBERS OF YOUR HOUSEHOLD**

Enter the name and relationship of all people living in your household. Check yes or no to identify if they contribute to payment of household expenses.

I live alone.

	Name	Relationship	This person helps pay expenses	
			Yes	No
1.			<input type="checkbox"/>	<input type="checkbox"/>
2.			<input type="checkbox"/>	<input type="checkbox"/>
3.			<input type="checkbox"/>	<input type="checkbox"/>

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

4.			<input type="checkbox"/>	<input type="checkbox"/>
5.			<input type="checkbox"/>	<input type="checkbox"/>
6.			<input type="checkbox"/>	<input type="checkbox"/>
7.			<input type="checkbox"/>	<input type="checkbox"/>
8.			<input type="checkbox"/>	<input type="checkbox"/>

**4. MONTHLY INCOME**

Income from wages / salary is received: (check one)

**To calculate monthly gross income use the multiplier shown:**

- weekly -multiply weekly income by 4.33     every other week (bi-weekly) multiply bi-weekly income by 2.17  
 monthly     twice a month-multiply semi-monthly income by 2

<b>MONTHLY GROSS INCOME</b>		
1.	Gross <b>monthly</b> income (before taxes and deductions) from salary and wages, including commissions, allowances and overtime. (See above how to calculate.)	
2.	Pensions and retirement funds received	
3.	Social Security benefits received	
4.	Disability and Unemployment Insurance received	
5.	Public Assistance Funds received	
6.	Interest and Dividends received	
7.	Child Support and maintenance (spousal support) received from any prior marriage/relationship	
8.	Rental payments received (from property you rent to others)	
9.	Bonuses received	
10.	Other sources of income received: (please specify)	
11.		
12.		
13.		
<b>Total Gross Income (add lines 1-12)</b>		

<b>MONTHLY DEDUCTIONS</b>		
14.	Number of tax exemptions claimed	
15.	Monthly federal income tax withheld	
16.	Monthly state income tax withheld	
17.	Social Security	
18.	Medicare	
19.	Medical insurance	
20.	Other insurances	
21.	Union or other dues	
22.	Retirement or pension fund	
23.	Savings plan	
24.	Credit union	
25.	Child support or spousal support payments	
26.	Other deductions: (please specify)	
27.		
28.		
<b>Total Monthly Deductions (add lines 14 – 27)</b>		
<b>MONTHLY NET INCOME (subtract line 28 from line 13)</b>		

**5. ANTICIPATED MONTHLY EXPENSES**

<b>My Monthly Expenses</b>		
1.	Rent or mortgage payment (primary residence)	
2.	Real Estate Property taxes (residence)	
3.	Repairs and maintenance (including maintenance of appliances and furnishings)	
4.	Food (include eating out) and household supplies	
5.	Utilities (electricity, heat, water, sewage, trash)	

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

6.	Telephone (local, long distance & cellular)	
7.	Cable and Internet Services	
8.	Laundry and dry cleaning	
9.	Clothing and shoes	
10.	Medical, dental and prescription drug expenses (not covered by insurance)	
11.	Insurance (life, health, accident, auto, liability, disability, homeowner's or renter's-excluding insurance that is paid through payroll deductions)	
12.	Childcare (babysitting and day care)	
13.	Child support or spousal support payments (due to previous marriage or relationship) (Exclude payments made through payroll deductions)	
14.	School expenses (child and adult education)	
15.	Entertainment (include clubs, social obligations, travel, recreation)	
16.	Incidentals (grooming, tobacco, alcohol, gifts, holidays and special occasions)	
17.	Transportation (other than automobile)	
18.	Auto payments (loans/leases)	
19.	Auto expenses (gas, oil, repairs, maintenance)	
20.	Newspapers, magazines, books	
21.	Care and maintenance of pets (food, vet, grooming)	
22.	Payments to any dependents not living in your home and not included in a category above (including college age children)	
23.	Hobbies	
24.	Other taxes than those listed above (exclude payroll deductions)	
25.	Other expenses (include expenses of other real properties owned, professional services such as counseling and tax/legal advice, etc)	
	Other Monthly installment payments:	
26.	Mortgage (other than primary mortgage)	
27.	Other vehicle payments	
28.	Credit card debt (total minimum monthly payments)	
29.	Court ordered obligations	
30.	Student loans	
31.	Personal loans	
<b>TOTAL MONTHLY EXPENSES (Add lines 1-31)</b>		

**6. ASSETS: List ALL assets that you own individually and together with the other party without regard to how they have been or will be divided later**

If you do not have assets in an asset category, write "none" under the heading and enter "zero" in the estimated value column. If you need more space, please attach additional sheets.

A = Joint Petitioner A B = Joint Petitioner B      T = Together	Ownership or Title Held by			Current Possession			Amount Owed	Estimated Value Today
	A	B	T	A	B	T		
<b>Household Items</b>								
Household furniture & accessories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Household appliances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Kitchen equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
China, silver, crystal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

Jewelry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Clothing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Antiques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Art	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Electronic equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Sports equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Recreational vehicles, boats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Automobiles:</b> Year, Make, Model	<b>A</b>	<b>B</b>	<b>T</b>	<b>A</b>	<b>B</b>	<b>T</b>	<b>Amount Owed</b>	<b>Estimated Value Today</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<b>Life Insurance</b> Name of Company & Policy #	<b>A</b>	<b>B</b>	<b>T</b>	<b>Beneficiary</b>			<b>Face Amount</b>	<b>Cash Value Today</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
<b>Business Interests</b> Name of Business & Address	<b>A</b>	<b>B</b>	<b>T</b>	<b>Type of Business</b>			<b>% of Ownership</b>	<b>Value MINUS Indebtedness</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

<b>Securities: Stocks, Bonds, Mutual Funds,            Commodity Accounts</b> Name of Company & # of shares	<b>Ownership or Title held by</b> A = Joint Petitioner A B = Joint Petitioner B T = Together					<b>Value            Today</b>
	A	B	T			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Pension, Retirement Accounts,            Deferred Compensation, 401K Plans, IRAs,            Profit Sharing, etc.</b> Name of Company & Type of Plan	A	B	T	% Vested if known	Date of Valuation	Value Today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Cash and Deposit Accounts            (Savings and Checking)</b> Name of Bank or Financial Institution	A	B	T	Type of Account	Account # Last 4 digits	Balance Today
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
<b>Other Personal Property</b> Description of Asset	A	B	T	Type of Property	Value	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

Assets Acquired Description of Asset	Ownership			Acquired by			Date Acquired	Value Today
	A = Joint Petitioner A B = Joint Petitioner B T = Together			G - Gift I - Inherited B - Before Marriage				
	A	B	T	G	I	B		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

  

Real Estate	Parcel 1	Parcel 2	Parcel 3
Type of Property			
Address: Street, City, State			
Ownership/Title	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> T	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> T	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> T
Current Fair Market Value			
Current Mortgage Balance			
Other Liens			

**7. MEDICAL, HOMEOWNERS/RENTERS, AUTOMOBILE, OTHER INSURANCE**

What type of insurance policies do you have?

Name of Company, Group # & Policy #	A	B	T	Type of Insurance	Date Issued
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**8. DEBTS: List ALL debts that you owe individually and together with the other party without regard to who will be responsible for payment later.**

If there are additional DEBTS, please attach a separate sheet of paper with the creditor's name and address, the type of obligation, who pays (A, B, T) and the current balance.

Creditor's Name & Address	Type of Obligation	Who Currently Pays			Monthly Payment	Current Balance
		A	B	T		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Petitioner/Joint Petitioner A: \_\_\_\_\_  
 Respondent/Joint Petitioner B: \_\_\_\_\_

		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**9. DISPOSAL OF ASSETS**

Did you dispose of any assets (sold, given away, or destroyed) in the 12 months before the case was filed?  
 Yes  No

If yes, complete chart below:

Property / Asset	Date of Disposal	Fair Market Value on Date of Disposal

**10. CURRENT LITIGATION**

Are you a party in any other lawsuit or litigation?  Yes  No  
 If yes, identify the lawsuit or litigation. \_\_\_\_\_

**11. BANKRUPTCY**

Have you ever filed for bankruptcy?  Yes  No  
 If yes, identify the following:

Type of filing \_\_\_\_\_  
 Date of filing \_\_\_\_\_  
 Current status \_\_\_\_\_

**12. DECLARATION**

I declare under the penalty of perjury that the above, including all attachments, are complete, true, and correct.

Sign and print your name.  
 Enter the date on which you signed your name.  
**Note:** This signature does not need to be notarized.

\_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Print or Type Name  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 Email Address Telephone Number  
 \_\_\_\_\_  
 Date State Bar No. (if any)

Petitioner/Joint Petitioner A: \_\_\_\_\_  
Respondent/Joint Petitioner B: \_\_\_\_\_

**This form is available in Spanish.**  
<https://www.wicourts.gov/forms1/circuit/index.htm>  
**Este formulario está disponible en español.**

Enter the name of the county in which this case is filed.	<b>STATE OF WISCONSIN, CIRCUIT COURT,</b> _____ <b>COUNTY</b>
Enter the name of the petitioner. If joint petitioners, enter the name of Petitioner/Joint Petitioner A.	<b>IN RE: THE MARRIAGE OF</b> <b>Petitioner/Joint Petitioner A</b> _____ Name (First, Middle and Last)
Enter the name of the respondent. If joint petitioners, enter the name of Respondent/Joint Petitioner B.	<b>and</b> <b>Respondent/Joint Petitioner B</b> _____ Name (First, Middle and Last)
Enter the case number.	<b>Admission of Service</b> Case No. _____

Check the box for each document that is being served.

If one of the documents is an Order to Show Cause, enter the date [month, day, year] the Order To Show Cause was signed by a court official.

On [Date] \_\_\_\_\_ I received a copy of the following documents:

- Authenticated **Summons and Petition**
- Order to Show Cause and Affidavit for Temporary Order** [Dated] \_\_\_\_\_
- A blank **Financial Disclosure Statement**
- Proposed Marital Settlement Agreement/Order** [Dated] \_\_\_\_\_
- Order to Appear** [Dated] \_\_\_\_\_
- Motion/Order to Show Cause for Contempt** [Dated] \_\_\_\_\_
- Motion/Order to Show Cause to Change:** \_\_\_\_\_  
[Dated] \_\_\_\_\_
- Requirement to attend parent education
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_

If other, enter the name of the document.

The party who is voluntarily accepting the documents must sign and print their name.

They must enter the date on which the Admission was signed.

**Note:** This signature does not need to be notarized.

▶ \_\_\_\_\_  
Signature

\_\_\_\_\_  
Name Printed or Typed

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email Address Telephone Number

\_\_\_\_\_  
Date State Bar No. (if any)



# Service

“Service” or “service of process” are the legal terms used to describe the act of giving notice of a lawsuit or court hearing to another person. There are several different methods and very specific time limits by which you must have the other party served. The type of service you are required to use depends on the type of forms you are filing. If you do not have the other party served properly (within the correct time limits and using the correct method), the court cannot hear or decide your case.

**Notice:** This packet describes only the most common methods of service available for use. Please seek legal assistance if you would like to explore additional/alternative methods or the forms you are filing are not listed.

Court Self-Help Form	Required Type of Service	Service Time Limits
<b>Summons and Petition for Divorce/ Legal Separation</b> (FA-4104V/FA-4105V)	Personal	Within <b>90 Calendar days</b> from the date the divorce/legal separation was filed
<b>Order To Show Cause and Affidavit for Temporary Order</b> (FA-4128V/FA-4129V)	Personal	Not less than <b>5 Business days</b> before the date of the Temporary hearing
<b>Response &amp; Counterclaim</b> (FA-4113V)	Mail	Within <b>20 Calendar days</b> after the date of service
<b>Order To Appear</b> (FA-4142V)	Personal	Not less than <b>24 hours</b> if the other party lives within the county the action is filed Not less than <b>72 hours</b> if the other party does NOT live in the county the action is filed, but in the State of Wisconsin
<b>Motion for and Notice of New (DeNovo) Hearing</b> (FA-4130V)	Personal (Contempt matters)	Not less than <b>5 Business days</b> before the date of the hearing
	Mail (All other matters)	Not less than <b>8 Business days</b> before the date of the hearing
<b>Notice of Motion and Motion (Post Judgment)</b> (FA-4170V)	Mail	Not less than <b>8 Business days</b> before the date of the hearing
<b>Order To Show Cause (Post Judgment)</b> (FA-4171V/FA-4172V)	Personal	Not less than <b>5 Business days</b> before the date of the hearing
<b>Notice of Motion and Motion to Relocate with Minor Children</b> (FA-4178V)	Mail	Not less than <b>8 Business days</b> before the date of the hearing
<b>Objection to Relocate with Minor children and Motion to change Placement and/or Custody</b> (FA-4179V)	Mail	Not less than <b>5 Business days</b> before the date of the hearing
<b>Subpoena</b> (GF-120)	Personal	Not less than <b>10 Business days</b> before the date of the hearing
<b>Notice of Hearing and Motion to Enforce Physical Placement Order</b> (FA-609)	Personal	Not less than <b>5 Business days</b> before the date of the hearing

**NOTE:** If you are unable to serve the other party within the required time limits, you may write a letter to the court requesting a different court date.

**WARNING:** Copies, NOT original documents, should only be given to the other party. The originals (if in your possession) and proof of service need to be returned to court after the other party has been served.

## Personal Service

There are **five** basic ways to have the other party personally served:

**1A. Admission of Service by the State of Wisconsin / Child Support Agency**

If the State of Wisconsin is a party to the action, you must serve your local Child Support Agency using the following steps below.

- Take a copy of the forms to be served and an **Admission of Service** form (FA-4119V) to the Child Support Agency.
- Give the papers to a representative from the Child Support Agency and ask him/her to "admit service". He/she will complete the bottom portion of the **Admission of Service** form.
- Return the **Admission of Service** form to the Clerk of Courts Office as proof of service (keep a copy for your records).

**1B. Admission of Service for the other party**

You may give the documents to the other party and **ask** that he/she voluntarily accept the papers from you. If the other party agrees to accept the documents, you need to:

- Complete the caption of the **Admission of Service** form (FA-4119V).
- Have him/her complete and sign the bottom.
- Return the **Admission of Service** form and a set of the documents served, as soon as possible to the Clerk of Courts. Remember to keep a copy for your records.

**If the other party will not voluntarily accept the papers from you, or you do not wish to have contact with the other party, you must have the other party served using one of the other methods described below.**

**2. Sheriff's Department**

The **Sheriff's Department**, of the County in which the individual to be served resides, may serve the other party. Proof of service and a set of the documents which were served must be returned to court as soon as possible. Remember to keep a copy for your records.

**3. Private Process Server**

You may make arrangements with a **private process server** to have the other party personally served. Contact individual companies for fees and procedural information. To find a private process server in your or the other party's area, you may look under "Process Service" using a phone or internet directory or by going to <http://www.iprocessservers.com>. Proof of service and a set of the documents which were served must be returned to court as soon as possible. Remember to keep a copy for your records.

**4. Service by Friend or Relative**

A friend or relative who is over 18, is a resident of Wisconsin, and is not a party to the action can also serve the other party.

- You:** complete the caption of the **Affidavit of Service** form (FA-4120V).
- Friend or Relative:** Gives a copy of the paperwork to the other party.
- Friend or Relative:** Completes the bottom portion of the **Affidavit of Service**.
- Friend or Relative:** Signs it in the presence of a notary public.
- You:** Return the **Affidavit of Service** form and a set of the documents served, as soon as possible to the Clerk of Courts. Remember to keep a copy for your records.

## LAST RESORT

**Before attempting this last resort, you should consider seeking legal assistance. There are specific and complicated rules that must be followed to successfully serve a party by publication.**

### 5. Service by Publication

Service by Publication is a **last resort** and can **only** be used if you failed to have the other party served by one of the methods above. You have a responsibility to make every effort to make personal service if possible, which includes gathering reasonably available information from family and friends to try and determine the other party's location.

The option of **Service by Publication** is only available to you if you can answer yes to **all** of the following:

- You have tried personal service through the Sheriff's Department or a private process server.
- You have given them as much information as possible to help them find the other person.
- The Sheriff's Department or private process server cannot find the other person after a diligent search.
- You have been given an **Affidavit of Due Diligence/Not Found/ Attempted Service** by the Sheriff's Department or private process server stating that the other party could not be found. Keep this affidavit.

**The Service by Publication Packet is available to assist individuals who are filing an action for divorce/legal separation.**

## Service by Mail

Serving documents on the other party by mail is allowed for certain types of forms. If service by mail is allowed, you must:

- Mail copies of the documents to the other party.
- Sign a sworn affidavit called the **Affidavit of Mailing** (FA-4121V) in the presence of a Notary Public.
- Return the **Affidavit of Mailing** and a set of the documents that were mailed to the Court as soon as possible. Remember to keep a copy for your records.