

Petitioner/Joint Petitioner A: _____
Respondent/Joint Petitioner B: _____

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

AFTER you have mailed the documents, you must complete the information to the right by **checking the boxes indicating the specific documents that you mailed.**
To review decision for a harassment or domestic abuse injunction, use Motion for DeNovo Hearing (CV-503) form.

UNDER OATH I STATE:

I placed in an envelope a copy of the following documents:

- A blank **Financial Disclosure Statement (FA-4139V) form**
- Requirement to attend parent education
- Motion for and Notice of New (DeNovo) Hearing (FA-4130V) form
- Response and Counterclaim (FA-4113V) form
- Notice of Motion to Change: (FA-4170V/FA-4171V - Post Judgment) form
- Motion for: _____
- Other: _____

I mailed that envelope with proper postage affixed on [Date] _____, 20____ to:

Name _____
Address _____
Address _____
City _____ State _____ Zip _____

If a motion, enter the type of motion.

Enter the date [month, day, year] on which you placed the documents in a mailbox, and the name and address of the person to whom you mailed them.

STOP!
Take this document to a Notary Public BEFORE you sign it.

After you have been sworn by a Notary Public, sign and print your name and date the document in front of the Notary Public. Have the Notary Public sign and date.	State of _____	▶ _____
	County of _____	Signature
	Subscribed and sworn to before me on _____	_____
	_____	Print or Type Name
	Notary Public/Court Official	_____
	Name Printed or Typed	Date
	My commission/term expires: _____	