

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

Enter the name of the county in which this case is filed.  
Enter the name of the petitioner. If joint petitioners, enter the name of Petitioner/Joint Petitioner A.  
Enter the name of the respondent. If joint petitioners, enter the name of Respondent/Joint Petitioner B.  
Enter the case number.

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

IN RE: THE  MARRIAGE  PATERNITY OF \_\_\_\_\_

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

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

**Declaration of Mailing**  
Case No. \_\_\_\_\_

**I DECLARE THAT:**

**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 De Novo Hearing (CV-503) form.  
  
If a motion, enter the type of motion.

- I placed in an envelope a copy of the following documents:
- A blank Income and Expense Statement (FA-4138V) form
  - A blank Financial Disclosure Statement (FA-4139V) form
  - Requirement to attend parent education
  - Motion for and Notice of New (De Novo) 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: \_\_\_\_\_

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.

I mailed that envelope with proper postage affixed on [Date] \_\_\_\_\_, 20\_\_\_\_ to:  
  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Sign this document WITHOUT a Notary Public.**

Provide a declaration under criminal penalty of false swearing in lieu of a sworn statement.  
  
You **do not** have to take the document to a Notary Public if you provide an unsworn declaration.

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

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