

Enter the name of the county in which you are filing this case.	<b>STATE OF WISCONSIN, CIRCUIT COURT,</b> _____ <b>COUNTY</b>	<b>Affidavit to Seal Identifying Information in a Child Custody Proceeding</b>  Case No. _____
Check marriage or paternity, if paternity, enter initials of child.	IN RE: THE <input type="checkbox"/> MARRIAGE OF <input type="checkbox"/> PATERNITY OF _____	
Enter the name of the petitioner.	<b>Petitioner</b> _____	
Enter the name of the respondent.	First name _____ Middle name _____ Last name _____ and <b>Respondent</b> _____	
<b>Note:</b> Leave case number blank; the clerk will add this.	First name _____ Middle name _____ Last name _____	

This form applies only in child custody proceedings. It allows the sealing of identifying information that you feel would endanger your health safety or liberty. Any and all information you choose not to include on the divorce/legal separation papers must be included on form GF-178 in the sealed envelope.

**UNDER OATH I STATE:**

I am involved in a Child Custody Proceeding in which the legal custody, physical placement, or periods of physical placement (visitation) of a child is an issue.

My health, safety or liberty, or that of a minor child, **WOULD** be jeopardized by disclosure of identifying information on court forms that I am filing.

**State factual basis:** \_\_\_\_\_  
 \_\_\_\_\_  **See attached**

I am attaching on court form GF-178 in a sealed envelope, the specific pieces of information that I believe should be sealed. I understand that the information may not be disclosed to the other party or the public unless the court orders the disclosure to be made after a hearing. At that hearing the court will take into consideration the health, safety or liberty of the party or a minor child and determine whether disclosure of the information is in the interest of justice.

**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.	_____ Signature
	_____ Print or Type Name
Have the Notary Public sign, date, and seal the document.	_____ Date
	State of _____ County of _____ Subscribed and sworn to before me on _____ _____ Notary Public/Court Official
	_____ Name Printed or Typed
	My commission/term expires: _____