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**

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

Petitioner/Joint Petitioner A:

_____

Name (First, Middle and Last)

Respondent/Joint Petitioner B:

_____

Name (First, Middle and Last)

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

Case No. _____

IV-D KIDS Case No. _____

Confidential Petition Addendum

Enter the name, date of birth [month, day, year], social security number, and phone number of each party. In A and B, enter the full name of the party at birth.

1. **Parties**

A. Petitioner/Joint Petitioner A/Alleged Parent: _____
Date of Birth: _____ SS#: _____ Phone No. _____
Full name at Birth: _____

B. Respondent/Joint Petitioner B/Alleged Parent: _____
Date of Birth: _____ SS#: _____ Phone No. _____
Full name at Birth: _____

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(ies) filing this addendum must sign and print their name(s) and date the document.

▶ _____
Signature

_____
Name Printed or Typed

_____
Address

_____
Email Address Telephone Number

_____
Date State Bar No. (if any)

▶ _____
Signature

_____
Name Printed or Typed

_____
Address

_____
Email Address Telephone Number

_____
Date State Bar No. (if any)