

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

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

Enter the name of the petitioner or plaintiff in that original case file.

**Petitioner/Plaintiff:**  
\_\_\_\_\_  
First name Middle name Last name

-VS-

Enter the name of the respondent or defendant in that original case file.

**Respondent/Defendant:**  
\_\_\_\_\_  
First name Middle name Last name

Enter the case number. File one form per case.

**Request to Correct Court Record**

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

Select the check box that best applies to your situation. If you check box 2, describe in as much detail as you can what the error is. **Note:** The fact that you disagree with a court's decision is **NOT** an error that can be corrected. Additionally, write in how it is that you know the information in the records is incorrect.

1. I  am  am not one of the parties to this case. If I am not a party, my relationship to this case is \_\_\_\_\_.

2. There is an error in the record of the clerk of court in the above case.  
The following information is incorrect: \_\_\_\_\_  
\_\_\_\_\_

I know this information is incorrect because: \_\_\_\_\_  
\_\_\_\_\_

**-OR-**

Select the check box that best applies to your situation. If you check box 3, select the box that best fits your situation. **Note:** The fact that you disagree with a court's decision is **NOT** a reason to remove the records from the WCCA website.

3. I am requesting that the record no longer display online on the Wisconsin Circuit Court Access (WCCA) website because it is a:  
 small claims case that is displaying more than two years after the case was dismissed or all claims were denied.  
 criminal case that is displaying more than two years after an acquittal or dismissal and no additional charges were dismissed and read into the record or not dismissed.

Sign your name, print your name on the line and complete the address, email, phone number, date and state bar number (if any) on the document.

▶ \_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Address

\_\_\_\_\_  
Email Address Daytime Phone / Fax Number

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