

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

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|---|---|--|
| Enter the name of the county in which this case is filed. | STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY | Motion to Revoke Suspension of Proceedings to Effect Reconciliation Case No. _____ |
| Enter the name of the Petitioner/Joint Petitioner A. | IN RE: THE MARRIAGE OF Petitioner/Joint Petitioner A _____ Name (First, Middle and Last) | |
| Enter the name of the Respondent/Joint Petitioner B. | Respondent/Joint Petitioner B _____ Name (First, Middle and Last) | |
| Enter the case number. | | |

1. A Suspension to Effect Reconciliation of Proceedings was ordered.
2. I move the court to revoke the suspension and proceed with the action. I understand that any temporary order will be reinstated.
3. If either party is receiving public assistance or there is a caseworker from the Child Support Agency, I am providing a copy of this motion to the Child Support Agency.

Sign and print your name.
Enter the date on which you signed your name.
Note: You must send a copy of this Motion to the other party before you file it with the court.
Note: This signature does not need to be notarized.

▶ _____
Signature

Print or Type Name

Date

PARTIES MUST INCLUDE A PROPOSED ORDER THAT WILL ONLY BECOME ENFORCEABLE IF SIGNED BY A CIRCUIT COURT JUDGE OR CIRCUIT COURT COMMISSIONER.