

Petitioner/Joint Petitioner A: _____

Respondent/Joint Petitioner B: _____

Enter the name of the county in which the original case was filed.

STATE OF WISCONSIN, CIRCUIT COURT,
_____ **COUNTY**

Mark marriage or paternity. If paternity, enter initials of child.

IN RE: THE MARRIAGE PATERNITY OF _____

Enter the name, address, and daytime phone number of the petitioner/joint petitioner A from the original case file.

Petitioner/Joint Petitioner A

Name (First, Middle and Last)

Current Mailing Address

City State Zip Daytime phone number

and

Respondent/Joint Petitioner B

Enter the name, address, and daytime phone number of the respondent/joint petitioner B from the original case file.

Name (First, Middle and Last)

Current Mailing Address

City State Zip Daytime phone number

Mark if the State of WI is a party or not. If you are unsure, you may call your local Child Support Agency.

The State of Wisconsin (Child Support Agency)

is

is not a party to this action.

Order on Stipulation to Change

- Legal Custody
- Physical Placement
- Child Support
- Maintenance
- Family Support
- Arrears Payment/Balances
- Other: _____

Case No. _____

THE COURT ADOPTS AS FINDINGS THE FACTS SET FORTH IN THE STIPULATION DATED _____.

For Court Use Only.
To be used with
FA-604A.

THE COURT FURTHER FINDS:

Deviation from the child support percentage standards meets the requirements of §767.511(1n), Wis. Stats.

THE COURT ORDERS:

- A. The stipulation is **approved**.
 1. The previous judgment or order is amended accordingly.
 2. All provisions of the previous judgment or order not amended by this order remain in full effect.
 3. Whenever private, accessible and reasonably-priced health insurance becomes available to either parent at a reasonable cost, that parent shall enroll the child(ren) as covered dependents under his/her health insurance, unless the child(ren) are already enrolled under another private health insurance plan or unless the parent's income is below 150% of the federal poverty level.
- B. The stipulation is **denied** because _____
- C. The court hearing scheduled for [Date] _____, 20____ is removed from the court's calendar.

BY THE COURT:

Circuit Court Judge/Circuit Court Commissioner

Title (Print or Type Name if not eSigned)

Date

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