|  |  |  |
| --- | --- | --- |
| 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 |
| On the far right, mark the box for the change(s) you are requesting and enter the original case number. | Order onStipulation to Change Legal Custody  Physical Placement  Child Support  Maintenance  Family Support  Arrears Payment/Balances  Other:  Case No. |
| Enter the name, address, and daytime phone number of the respondent/joint petitioner B from the original case file. | **Respondent/Joint Petitioner B**    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. |

|  |  |  |  |
| --- | --- | --- | --- |
| **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:** |
| **For Court Use Only.** |  |  | Circuit Court Judge/Circuit Court Commissioner    Title (Print or Type Name if not eSigned)    Date |