**STATE OF WISCONSIN CIRCUIT COURT MILWAUKEE COUNTY**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| In re:      \_\_\_\_\_\_\_(child’s initials) | | | | | | | | | | | | **Motion to Reopen for DNA Testing**  Case No.:  Family A  B  C  D  E | | | | | |
| Mother / Birthing Parent    First Name Middle Initial Last Name    Street City State Zip Code    E-mail address Phone Number  -- and –  Father / Non-Birthing Parent Named in this Action    First Name Middle Initial Last Name    Street City State Zip Code    E-mail address Phone Number | | | | | | | | | | | |
| **TO:** | | | (Name) | | | | |  | | | **AND TO:** Child Support Agency | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| 1. | | | My name is       , and my relationship to the child listed below is: | | | | | | | | | | | | | | |
|  | | |  | Mother / Birthing Parent | | | | | | | | | | | | | |
|  | | |  | Father Named in This Action / Non-birthing Parent Named in This Action | | | | | | | | | | | | | |
|  | | |  | Both Parents | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| 2. | | I am / We are asking the court to reopen this case and order DNA Testing for the following child: | | | | | | | | | | | | | | | |
|  | | Name: | | | | | | | | DOB: | | | | |  | |  |
|  | | | | | | | | | | | | | | | | | |
| 3. | | | Father / Non-birthing Parent was added to the case by | | | | | | | | | | | | | | |
|  | | |  | | Paternity Judgment Date: | | | | | | | | | | | | |
|  | | Signed Voluntary Paternity Acknowledgement (VPA) Date: | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | |
| 4. | | | Final Orders for this case were issued on the following date: | | | | | | | | | | | | | | |
|  | | |  | | | I was present | | | | | | | | The other party was present at the hearing | | | |
|  | | |  | | | I was not present at the hearing | | | | | | | | The other party was not present at the hearing | | | |
|  | | | | | | | | | | | | | | | | | |
| 5. | I/we request the court reopen the Judgment of Paternity and grant a request for DNA testing for the following reasons:    .   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  See Attached | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| ***A copy of this motion must be served upon the opposing parties personally, no fewer than 5 business days prior to the hearing and proof of service (affidavit of personal service) must be filed with the court before the hearing.*** | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | (Use 2nd signature line if filing request jointly) | | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature (if not electronically submitted) Date | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_  Signature (if not electronically submitted) Date | | | | |
| Print Name: | | | | | | |  | | | | | | Print Name: | | |  | |
|  | | | | | | | | | | | | | | | | | |
| **A HEARING WILL BE HELD ON THIS REQUEST AS FOLLOWS:** | | | | | | | | | | | | | | | | | |
|  | | | | | | **DATE:** | | |  | | | | | | | | |
|  | | | | | | **TIME:** | | |  | | | | | | | | |
|  | | | | | | **PLACE:** | | | **Milwaukee County Courthouse, 901 N. 9th Street, Room**      , **Milwaukee, WI 53233** | | | | | | | | |
|  | | | | | | **BEFORE:** | | | **Judge** | | | | | | | | |
| ***If you fail to attend the hearing, the Court may go ahead without you and has the power to make the orders requested in this document.*** | | | | | | | | | | | | | | | | | |