



STERLING LAW OFFICES, S.C.

Confidential Petition Addendum

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Serving the Milwaukee, Madison, and Fox Valley Areas

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Beaver Dam, WI 53916
(920) 557-3335

[Middleton Office](#)

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#600
Middleton, WI 53562
(608) 208-6017

----- Fox Valley Area Offices -----

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3701 E Evergreen Dr
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Sheboygan, WI 53081
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Green Bay, WI 54301
(920) 393-2900

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17 Forest Ave
#017
Fond du Lac, WI 54935
(920) 944-6665

[Oshkosh Office](#)

Sterling Law Offices, S.C.
111 N Main St
#400
Oshkosh, WI 54901
(920) 479-2058

Petitioner/Joint Petitioner A: _____

Respondent/Joint Petitioner B: _____

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

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

This form is used for family and paternity case types. Some information may not apply to your case.

Petitioner/Joint Petitioner A:

Name (First, Middle and Last)

Respondent/Joint Petitioner B:

Name (First, Middle and Last)

Enter the case number and child support IV-D KIDS number, if known.

Case No. _____

IV-D KIDS Case No. _____

Confidential Petition Addendum

1. Parties

Enter the name, date of birth [month, day, year], and social security number of each party.

- A. Petitioner/Joint Petitioner A/Alleged Parent: _____
Date of Birth: _____ SS#: _____ Phone No. _____
- B. Respondent/Joint Petitioner B/Alleged Parent: _____
Date of Birth: _____ SS#: _____ Phone No. _____
- C. Other party: (If any) _____
Date of Birth: _____ SS#: _____ Phone No. _____

☐ See attached

2. Minor Child(ren) that we have together

Enter the name, date of birth [month, day, year], and social security number of each minor child. If there are no minor children, check none. Attach additional pages if necessary.

- A. The minor child(ren) of the other party and me (born or adopted) before or during the marriage/relationship are:

☐ None

Name of Minor Child	Date of Birth	SS#

☐ See attached

B. Other Minor Child(ren)

If this is a divorce or legal separation, list **other** minor child(ren) born to either party during this marriage, but not fathered by the other party:

☐ None

Name of Minor Child	Date of Birth	SS#	Parent

☐ See attached

The party(s) filing this addendum must sign and print your name and date the document.

▶ _____
Signature

Name Printed or Typed

Address

Email Address _____
Telephone Number

Date _____
State Bar No. (if any)

▶ _____
Signature

Name Printed or Typed

Address

Email Address _____
Telephone Number

Date _____
State Bar No. (if any)