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,				
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 or joint petitioner from the	Name (First, Middle and Last)				
On the far right, mark the box for the change(s) you are requesting and enter the original case number.	Current Mailing Address City State Zip Daytime Phone Number -VS-	Notice of Motion and			
Enter the name, address, and daytime phone number of the respondent or joint petitioner from the original case file.	Respondent/Joint Petitioner B	Motion to Change  Legal Custody  Physical Placement  Child Support  Maintenance  Arrears Payment			
	Current Mailing Address				
Check if the State of Wisconsin is a party or not. If you are unsure, you may call your local Child Support Agency.	City     State     Zip     Daytime Phone Number       The State of Wisconsin (Child Support Agency)       is       is not a party to this action.	Case No.			
	NOTICE OF MOTION				
Enter the name of the person to whom this motion is directed.	ТО:				
For Court Use Only: This section will be completed by the court.	You are notified that at the following date and ti         Before				
	or as soon as the matter may be heard.				
	I will be asking the court to change the existing order in this c If you object to this motion, you need to appear and say so. ( proceed without you and grant the request.				
	You may contact the office of the family court commissioner f	or written information on			

modifying and enforcing court orders or judgments.

## MOTION

1. **MODIFY** as follows:

A. **Physical Placement Order(s)** (time with children) for the following children:

1)	from primary physical placement with [Name of Parent]
	to primary placement with [Name of Parent]
<b>—</b> • •	

- 2) from shared placement to primary placement with [Name of Parent]
- 3) from primary placement to shared placement.

FA-4170V, 08/21 Notice of Motion and Motion to Change: Custody/Physical Placement/Support/Maintenance/Arrears Payment §§767.105, 767.451, and 767.59, Wisconsin Statutes This form shall not be modified, It may be supplemented with additional material.

## Petitioner/Joint Petitioner A: \_\_\_\_\_ Respondent/Joint Petitioner B:

Check A if you are requesting a change to		<ul> <li>4) from the current shared placement schedule (if any) to a new shared placement schedule.</li> <li>The requested placement schedule for the changes in 1-4 above is as follows:</li> </ul>
physical placement, list the children affected, check 1-4 and/or 5 and/or 6-7 and complete the necessary information. Indicate if you have or		<ul> <li>See attached</li> <li>5) If either parent is receiving less than 25% placement with the minor child(ren), the specific reasons more placement with that parent is not in the child(ren)'s best interest is as follows:</li> </ul>
have not attempted Mediation. If you have, indicate the date of the Mediation session.		<ul> <li>Generation Generation See attached</li> <li>Generation See attached</li> <li>Beneration See attached</li> <li>Beneration See attached</li> <li>Beneration See attached</li> </ul>
		7) Other:     See attached
		The other party and I attempted mediation on [Date]
Check B if you are	□ B.	Legal Custody (decision making) for the following children:
requesting a change to legal custody, list the children affected, check 1, 2, or 3 and complete the necessary information.		<ul> <li>1) to joint legal custody with both parents.</li> <li>2) to sole legal custody with [Name of Parent]</li> <li>3) Other:</li> </ul>
Check C if you are requesting changes to child support orders. In 1, enter the amount and frequency of the current payment and check whether it includes a deviation for health insurance.	□ C.	Child Support       □ See attached         1) that is currently \$ per that         □ a. does not include a deviation for health insurance or any other reason.         □ b. does include a deviation of \$ upward □ downward for health insurance.
In 2, check a, b, or c.		<ol> <li>to a new amount beginning to be paid by [Parent] to [Parent]</li> </ol>
		<ul> <li>a. based on state child support standards determined by the court.</li> <li>b. a new set amount of \$ per</li> <li>c. held open (no payment).</li> <li>I request that this new amount</li> <li>1. not include a deviation for health insurance or any other</li> </ul>
Check 1 or 2, indicate deviation information.		<ul> <li>reason.</li> <li>include a deviation of \$</li> <li>upward</li></ul>
Check all that apply in D or E, and complete all relevant information for each section checked	☐ D.	Maintenance (Spousal Support) that is currently \$ per to         1) an amount beginning, 20 to be determined by the court based on current income.         2) a new set amount of \$ per beginning, 20
	🗌 E.	Arrears payment that is currently \$ per to [1] an amount beginning, 20 to be
		<ul> <li>determined by the court.</li> <li>a new set amount of \$ per beginning</li> <li>20 beginning</li> </ul>

I will be able to provide documentation to the court that supports my request.

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	NOTIC		Both parties must bring a fully Disclosure Statement to court		gned Financial
In F, enter any other	]	🗌 F.	Other change(s):		
changes you may have.					See attached
In 2, enter the date the	2.	The c	ourt order that I am asking to be	e modified was dated	
current court order or judgment was signed by a court official	<ul> <li>This request is based on the following substantial change in circumstances that have occurred since the entry of the prior court order in this case.</li> <li>A. A child who was living with the other parent is now living with me.</li> </ul>				
In 3, check all that apply in A-J. If F or G, enter the party's information that has changed. If other, enter the change in circumstance that has prompted you to bring this Motion.		<ul> <li>A child is no longer eligible for child support because the child has reached age 18, or is over 18 but under 19, and is no longer pursuing a course of education leading to a high school diploma or its equivalent.</li> <li>C. One of the parties has or will be moving to a different residence.</li> <li>D. The parties are no longer living together.</li> <li>E. There is not a placement schedule and the parties cannot agree.</li> <li>F. Employment or work shift of has changed.</li> <li>both parties has changed.</li> <li>G. Income or wages of has changed.</li> <li>H. The availability or cost of health insurance has changed.</li> <li>J. Other:</li> </ul>			
Describe the facts that justify the change you want. Attach additional	This is a substantial change in circumstances because:				
pages, if necessary	J				See attached
If you require reasonable	accomm	odation	ns due to a disability to participate i	in the court process, please call	:
			note that the court does not provid		
	1			<u> </u>	
Sign and print your name.				Signatu	re
Enter the date on which you signed your name.		Print or Type Name			
<b>NOTE:</b> This signature				Addre	SS
does not need to be				Email Address	Telephone Number
notarized.					
	]			Date	State Bar No. (if any)

A copy of this Notice of Motion and Motion must be served upon all other parties at least 5 (five) business days before the date of the hearing. If service is by mail, it must be mailed at least 8 (eight) business days before the date of the hearing. See the Service Packet (FA-5000V) <u>https://www.wicourts.gov/formdisplay/FA-5000V\_instructions.pdf?formNumber=FA-5000V&formType=Instructions&formatId=2&language=en</u> for more information.