

Enter the name of the county in which you are filing this case.	STATE OF WISCONSIN, CIRCUIT COURT, MILWAUKEE COUNTY	
In the box to the right, enter the name of the case exactly as it is shown on other papers from the same case.	Case Caption: WRITE CHILD'S NAME HERE	Uniform Child Custody Jurisdiction and Enforcement Act Affidavit
Note: Enter case number if one has been assigned; otherwise, leave case number blank. The clerk will add this.	WRITE CHILD'S BIRTH DATE HERE	
Case No. _____		

Enter the name(s) of the child(ren) and their current address. If they currently reside at separate addresses, provide those addresses on an add'l sheet.	UNDER OATH I STATE:
Enter any previous addresses at which the child(ren) have lived in the past 5 years. Attach additional sheet, if necessary.	<p>1. The child(ren)'s name and present address are Name(s): <u>WRITE CHILD'S NAME HERE</u> Present Address: <u>WRITE CHILD'S CURRENT ADDRESS HERE</u> <input type="checkbox"/> See attached</p>
Enter the names and current address of each person with whom the child(ren) have lived in the last 5 years. If space is insufficient, or if individual children have lived at different address from others, attach an additional sheet and explain.	<p>2. The child(ren) have lived in the following places over the last 5 years: <u>LIST ALL CITIES/STATES CHILD HAS LIVED IN OVER LAST 5 YEARS</u> <input type="checkbox"/> See attached</p>
	<p>3. The name and present address of each person(s) with whom the child(ren) have lived over the last 5 years is Name: <u>WRITE NAME OF PERSON WHO CHILD IS CURRENTLY LIVING WITH</u> Present Address: <u>WRITE ADDRESS HERE</u> Time Period: <u>WRITE TIME PERIODS CHILD HAS LIVED WITH THIS PERSON</u></p> <p>Name: <u>LIST ANY OTHER PEOPLE CHILD HAS LIVED WITH OVER LAST 5 YEARS</u> Present Address: _____ Time Period: _____</p> <p>Name: <u>LIST ANY OTHER PEOPLE CHILD HAS LIVED WITH OVER LAST 5 YEARS</u> Present Address: _____ Time Period: _____</p> <p>Name: <u>LIST ANY OTHER PEOPLE CHILD HAS LIVED WITH OVER LAST 5 YEARS</u> Present Address: _____ Time Period: _____ <input type="checkbox"/> See attached</p>
Check yes or no. If yes, enter the name of the court, the case number assigned to it, and the date the court order was entered. Attach an additional sheet, if necessary.	<p>4. I have participated as a party, witness or in any other capacity in any other proceeding concerning the custody, physical placement, or visitation with the child(ren). <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify court, case number and date of any determination: <u>CHECK YES ONLY IF YOU HAVE PARTICIPATED IN A COURT CASE FOR THIS CHILD.</u> <u>LIST DETAILS HERE...</u> <input type="checkbox"/> See attached</p>
Check yes or no. If yes, enter the name of the court, the case number assigned to it, and the nature of the case (that is, what the case was about).	<p>5. I have information of other proceedings concerning the child(ren) pending in Wisconsin or any other state, including enforcement, domestic violence, protective orders, termination of parental rights and adoption. <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify court, case number and nature of proceedings: <u>CHECK YES ONLY IF YOU KNOW OF ANY COURT CASES INVOLVING THE CHILD LIST</u> <u>DETAILS HERE...</u></p>
Check yes or no.	

If yes, enter the name of and address of each person.

6. I know of persons not a party to this proceeding who have physical custody of the child(ren) or claim to have custody, physical placement, or visitation rights with respect to the child(ren).

Yes No If Yes, give name and address of each person:

CHECK YES ONLY IF THE CHILD IS NOT LIVING WITH YOU OR A PARENT. IF SO LIST THEIR NAME AND ADDRESS BELOW

7. I understand that I have a duty to inform the court if I learn in the future of any proceeding concerning the child in Wisconsin or any other state.

I declare under the penalty of false swearing that the information I have provided is true and accurate.



Signature

Print or Type Name

Address

Email Address

Telephone Number

Date

State Bar No. (if any)