

**PRINT in BLACK ink**

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

STATE OF WISCONSIN, CIRCUIT COURT,  
\_\_\_\_\_ COUNTY

For Official Use

Check marriage or paternity. If paternity, enter initials of the child.  
  
Enter the name of the petitioner. If joint petitioners, enter the name of the wife.

In re the  Marriage  Paternity of:

**Petitioner/Joint Petitioner-Wife:**

\_\_\_\_\_  
First name Middle name Last name  
and

Enter the name of the respondent. If joint petitioners, enter the name of the husband.

**Respondent/Joint Petitioner-Husband:**

\_\_\_\_\_  
First name Middle name Last name

**Stipulation and Order  
Dismissing Divorce/Legal  
Separation**

Enter the case number.

Case No. \_\_\_\_\_

**STIPULATION**

**IT IS STIPULATED THAT:**

1. The above parties have reconciled.
2. This action may be dismissed without further costs to either of the parties.
3. An order may be entered without notice to either of the parties.
4. Any income assignment shall end when the state has been paid in full. The state reserves the right to collect on any debts owed to it.

Check A or B. If B, describe the warrant that has been issued in this case.

**5. Warrants:**

- A.  There are **no** outstanding warrants to arrest issued in this action.  
 B.  There are outstanding warrants to arrest issued in this action. **Explain:**

\_\_\_\_\_  
\_\_\_\_\_

The wife must sign and print her name.  
  
Enter the date on which the wife signed.  
  
**Note:** This signature does not need to be notarized.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date

The husband must sign and print his name.

Enter the date on which the husband signed.

**Note:** This signature does not need to be notarized.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date

**State of Wisconsin, Child Support Agency**

- Approved
- Not Approved
- Not Required

If either party is receiving public assistance or there is a caseworker from the Child Support Agency assigned to your case, you must take this agreement to the Child Support Agency in your county for their approval.

If not, mark not required.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**ORDER**

**IT IS ORDERED**, that this action is dismissed without further costs to either of the parties.

**BY THE COURT:**

**For Court Use Only**

\_\_\_\_\_  
Circuit Court Judge/Court Commissioner

\_\_\_\_\_  
Print or Type Name

\_\_\_\_\_  
Date