

## INSTRUCTIONS FOR ORDER TO SHOW CAUSE PACKET

**Please read these instructions carefully and fully before beginning. Failure to complete the forms accurately will cause your motion to be dismissed and you will have to start over.**

### I. Who may use this Order to Show Motion Packet:

These forms can be used only if your divorce or paternity action was originally started in Manitowoc County Circuit Court. You do not have to live in Manitowoc now to use these forms.

### II. Papers to Be Completed:

You must complete the attached ORDER TO SHOW CAUSE and the AFFIDAVIT IN SUPPORT OF THE ORDER TO SHOW CAUSE.

### ORDER TO SHOW CAUSE

A. LINES 1 & 2: Fill in the name and address of the Petitioner and the Respondent. Follow the caption of your original action. You must have a current address for both parties to continue this process.

B. LINE 3: Fill in the same case number of your original action, i.e. 89 FA 00999.

C. LINE 4: Fill in the name of person you are bringing to court.

D. LINE 5: Leave blank.

E. LINE 6: Check the reason or reasons that you are bringing this action. If none of those listed on the form apply, check "Other" and write in what it is that you want the Court to do for you.

F. LINE 7: Leave blank.

### AFFIDAVIT FOR ORDER TO SHOW CAUSE

A. LINES 1, 2 & 3: Same as above.

B. LINE 4: Fill in your name..

C. LINE 5: Circle whether you are the Petitioner or Respondent and whether you are the mother or father and fill in the names and dates of birth of your children.

D. LINE 6: Check the type of order you want enforced or changed. Also, fill in the date of the court order granting you the items you desire to have changed or enforced with an explanation of how your circumstances have changed since the date of your last order. (e.g. The court ordered me to pay \$55 per week for child support on May 1, 1995. I wish to have that amount changed to \$45.00 per week because I have extraordinary medical expenses).

E. LINE 7 & 8: After completion, you must sign this document in front of a Notary Public. Do not sign this form until you are in front of one. You must provide proper identification for your signature to be notarized. A Wisconsin driver's license or other picture i.d. may be required.

### III. Where to take the Completed Papers:

1. You must take the completed papers to the Office of Family Court Commissioner on the third floor of the Courthouse (Room 317), 1010 South Eighth Street, Manitowoc, WI 54220. The Commissioner's secretary will fill in the time and date of the hearing and will also get the Court's signature for you. The Hearing will take place in room B-15 of the Manitowoc Courthouse, 1010 South Eighth Street, Manitowoc, WI 54220.

**AFTER YOU GET THE HEARING DATE, MAKE FOUR(4) or FIVE (5) (\*see below) COPIES OF BOTH THE ORDER TO SHOW CAUSE AND THE AFFIDAVIT IN SUPPORT OF THE ORDER TO SHOW CAUSE.**

2. You must take the completed papers bearing the Circuit Court Commissioner's signature to the Clerk of Court's Office on the first floor of the Courthouse. You must file your papers with the Clerk of Court or your hearing will be canceled. The filing fee is \$30.00 for all matters that do not contain a change of placement or custody. The filing fee is \$50.00 for all matters that request a change of placement or custody. If you feel that you cannot afford the fee, you may ask the Clerk of Affidavit of Indigency form. Under certain circumstances, the Court may waive the fee. Be prepared to pay the filing fee in the event that you are not deemed to be indigent. The Clerk will file stamp your documents.

3. Return one copy to Office of Family Court Commissioner.

4. Keep one copy for yourself.

5. The two remaining copies will be used to serve the other party. Present them to the process server.

\* 6. The Child Support Agency will also need a copy of the papers if: you are currently receiving AFDC/W-2 benefits or if the Child Support Agency has ever been involved in your case. If this applies to you, you will need an additional set of copies for them. Have the Child Support Agency admit service of the documents.

### IV. Serving your Papers:

Be aware that **both** parties must appear in court. If the other party does not voluntarily appear, the court cannot proceed unless you have had that person served with your motion. There are laws governing the conduct of process servers, limiting the hours and places they can serve, and the specific procedures for out of state service in addition to the requirements listed below, **IT IS STRONGLY RECOMMENDED** that you have the Sheriff's Department or a private process server serve your papers. Without service or if service is not done properly, your action will be dismissed and you will have to start all over again.

1. To get service, a file stamped copy of the papers must be placed in the hands of the other party at least five working days prior to the scheduled hearing time. **BY LAW, YOU CANNOT SERVE THE OTHER PARTY YOURSELF.**

2. Who can serve the papers?

a) Manitowoc County Sheriff Department located across the street from the courthouse. Give them two copies of your forms and pay their service fee. Manitowoc County requires a deposit before they will do your service. There may be additional fees for more than one attempt at service. If the Sheriff Department is doing your service, fill in the Data Sheet for them and take it to them with the other papers.

b) Private process server. Any private law firm can give you the name of a private process server and how they can be contacted. Be advised that if your documents are not properly served, your action will be dismissed.

c) Any adult except you. Give the adult two copies and instruct as follows: After the process server hands the other party a copy of all forms, the server must:

I) Complete the Affidavit of Service, the last form in this packet, and sign his or her name in the presence of a Notary Public.

II) File a copy of the documents with the completed Affidavit of Service in the Clerk of Court Office **BEFORE** the hearing date.

#### V. Special procedures required for custody or physical placement (visitation) disputes:

If your request is to change legal custody or periods of physical placement (visitation), and the other party indicates to the court that he/she does not agree to what you are requesting, your hearing will be adjourned approximately eight weeks in order to allow the following:

##### Step One: Mediation

First, you and the other party must attend an initial session with a mediator. You will have to fill out the Request for Mediation form to be referred to mediation. (The Family Court Commissioner can make an exception to this requirement if attending mediation will cause undue hardship or endanger the health or safety of one of the parties.) The purpose of mediation is to work with a trained professional in attempting to mutually solve the disagreement as it pertains to custody or periods of physical placement (visitation). If an agreement is reached, the mediator will report that to the court, and you and the other party can put that agreement on the record at the hearing. The Family Court Commissioner will then draft an Order Revising Judgment that reflects your agreement.

##### Step Two: Appointment of a Guardian ad Litem

If mediation fails and you still have a disagreement over custody or periods of physical placement, the mediator will so inform the court and a guardian ad litem will be needed for your child(ren). The guardian ad litem is an attorney that represents the best interests of the child(ren). Each party will be required to pay \$500 as a down payment toward the guardian ad litem fees, which are charged at the rate of \$70 per hour. The guardian ad litem will not begin his/her investigation on behalf of your child(ren) until the moving party (the one that is bringing the Order to Show Cause) pays his or her \$500. If the moving party fails to make that payment, the Order to Show Cause will be dismissed.

#### VI. Closing remarks.

1. As a "pro se" litigant, you assume the responsibility for bringing your action. You are expected to complete all of the necessary steps yourself. Court clerks and staff in the family court commissioners office cannot fill out your papers or advise you on how to proceed with your action.

2. Be prompt for your hearing. If you are not on time, your action will be dismissed. If

you have not obtained service on the other party *before* the hearing date, contact the family court commissioner office either for a new date or request that the matter be removed from the calendar.

3. Prepare as if you are your own attorney. This means bringing in any information which will make your case more believable. Have all documents and witnesses to prove your case with you.

4. CAUTION: If you brought this matter to court to harass, to “get even”, or for any other reason beyond your claims, and the court finds your claims insincere or false, you can be penalized by a requirement to pay the other person’s attorney fees and costs of defending this action.

5. The Judge, clerk of court office and office of family court commissioner cannot give you any legal advice. If you are uncertain of your legal rights, contact an attorney.

1. \_\_\_\_\_,  
Petitioner

Address \_\_\_\_\_  
\_\_\_\_\_

and

2. \_\_\_\_\_,  
Respondent

Address \_\_\_\_\_  
\_\_\_\_\_

ORDER TO SHOW CAUSE  
TO REVISE A JUDGMENT

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

4. TO: \_\_\_\_\_

5. YOU ARE HEREBY ORDERED TO APPEAR BEFORE THE COURT, Hon. \_\_\_\_\_,  
\_\_\_\_\_, in the Courthouse, 1010 South 8 Street, Room B-15, Manitowoc, Wisconsin  
on \_\_\_\_\_, at \_\_\_\_\_ (AM)(PM) to show cause if any you have, why an  
order should not be entered modifying prior orders of the Court as it relates to:

6. CUSTODY/PHYSICAL PLACEMENT

- \_\_\_ Change legal custody
- \_\_\_ Change or order specific periods of physical placement
- \_\_\_ Prohibiting removal of child(ren) from the State
- \_\_\_ We last attended mediation on \_\_\_\_\_

SUPPORT

- \_\_\_ Modification of support order
- \_\_\_ Payment of child support
- \_\_\_ Payment of arrears
- \_\_\_ Payment of medical bills
- \_\_\_ Payment of medical insurance premiums
- \_\_\_ Allocation of dependency deduction
- \_\_\_ Payment of Variable Expenses for children
- \_\_\_ Other \_\_\_\_\_

This document along with the supporting Affidavit shall be personally served on the opposing party no later than 5 days before the time fixed for the hearing. Saturdays, Sundays and holidays shall be excluded from the 5-day computation.

FAILURE TO APPEAR BEFORE THE COURT ON THE ABOVE DATE MAY RESULT IN AN ORDER FOR YOUR ARREST.

Dated: \_\_\_\_\_.

7.

\_\_\_\_\_  
Circuit Court Commissioner



MANITOWOC COUNTY SHERIFF'S DEPARTMENT  
INFORMATION SHEET FOR CIVIL PROCESS/PAPER SERVICE

To the Petitioner/Submitter:

You are requested to provide, to the best of your ability the following information. It is understood that all information may not be available to you. However, all information provided will assist us in the service of your papers.

Court Date: \_\_\_\_\_ Court Time: \_\_\_\_\_ Serve By (Date): \_\_\_\_\_

Please Print Clearly

INFORMATION ON THE PERSON TO BE SERVED

Paper Service for: Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ or Age \_\_\_\_\_

Present address \_\_\_\_\_ Home Phone # \_\_\_\_\_

Temporary address \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Vehicle \_\_\_\_\_ Color \_\_\_\_\_ License Plate # \_\_\_\_\_

Place of Employment \_\_\_\_\_

Address \_\_\_\_\_

Shift/Hours \_\_\_\_\_ Work Phone # \_\_\_\_\_

Suggested time to serve papers \_\_\_\_\_

Comments:

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

\*\*\*\*\*COMPLETE FOR DOMESTIC ABUSE SERVICE ONLY\*\*\*\*\*

Does the Respondent possess any firearms? Yes / No How many? \_\_\_\_\_

Where are the firearms stored? \_\_\_\_\_

Must the Respondent be removed from the residence? Yes / No ~ 72 hr. no contact in effect? Yes / No

Notify me when service is complete. Yes / No (Must provide telephone number below.)

**Person Requesting Service/Billing Information Must be completed!**

I understand that I will be billed for this service, unless I have provided an Indigency Order.

Your Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: M / F  
Last Name First Name MI

Mailing Address: \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell # \_\_\_\_\_

There is no fee for serving Temporary Restraining Orders or Injunctions.

In re the  Marriage  Paternity of \_\_\_\_\_

**Petitioner**

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

and

**Respondent**

**Affidavit of Service**

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

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

**Under oath I state that:**

I am an adult resident of the State of Wisconsin.

I am not a party to this action.

On (date) \_\_\_\_\_ at \_\_\_\_\_ o'clock in the a.m./p.m.

At (address) \_\_\_\_\_  
\_\_\_\_\_

I served copies of the following documents:

**Order To show Cause and Affidavit to Revise Judgment**

**Petition To Enforce Physical Placement**

Other: \_\_\_\_\_

personally by delivering to and leaving these documents with the person served whom I know to be \_\_\_\_\_

At the time of service, I signed my name, time, date, place and manner of service and upon whom service was made **on the copy that was served.**

\_\_\_\_\_  
Signature of the server

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

\_\_\_\_\_  
Date

Subscribed and sworn to before me  
on \_\_\_\_\_

\_\_\_\_\_  
Notary Public, State of Wisconsin

My commission expires: \_\_\_\_\_