

## Fees for Family Court Services

### Application To Set And/Or Waive Family Court Services Fees (Not for Parent Education Fees)

Email To: familycourtservices@countyofdane.com

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Name of Other Parent in Case

You have been referred to Family Court Services for repeat mediation, a custody/physical placement study, or a Brief Focused Assessment (BFA). The repeat mediation fee is \$100 per parent. The Dane County Ordinance has set the maximum study fee at \$2,000 and the BFA at \$1,200.

The Ordinance has established study and BFA fees based on the combined gross (before taxes or other deductions) annual incomes of all households. If you are married, your spouse's income is also included in the total. **In order to assess the appropriate fee and the amount you are responsible for, you must complete this Application To Set And/Or Waive Family Court Services Fee and submit the required documentation. This form also determines if the mediation and/or study fee is eligible to be waived.**

Please submit the application and all required documentation

by \_\_\_\_\_

- Repeat Mediation Fee  
 Study Fee  
 BFA Fee

Information can be

- Mailed to Dane County Family Court Services  
Dane County Court House  
215 S. Hamilton St. Room 2030  
Madison, WI 53703-3282
- Faxed to 608-266-6588

Note: We do not want social security numbers; you may delete it on any paperwork.

***You must attach copies of your 3 most recent pay stubs from employment and a copy of your most recent tax return with this application in order for it to be considered. The pages needed from your tax return are to show your income which is usually the first 2 to 3 pages of federal or state. If you are remarried, you must also attach copies of pay stubs and copies of the most recent tax return for your spouse showing their income.***

***Please make and provide copies of your taxes, pay stubs, etc. No originals please.***

Thank you, in advance, for your cooperation. If we do not receive your application and **all required financial information** by this due date your fee may be assessed at the maximum rate.

**APPLICATION TO SET AND/OR WAIVE FAMILY COURT SERVICES FEE**

Your Name \_\_\_\_\_ Case Number \_\_\_\_\_

Name of other parent \_\_\_\_\_

1. I get paid:

weekly    biweekly    two times per month    monthly

2. My gross paycheck (before taxes and other deductions) for the above circled pay period above is \$\_\_\_\_\_.

3. I receive other monthly income totaling \$\_\_\_\_\_ from pension, disability, social security, educational grants, interest and dividends or unemployment compensation.

4. I receive child support and/or maintenance in the amount of \$\_\_\_\_\_.

weekly    biweekly    two times per month    monthly

5. I have cash assets in savings accounts, checking accounts or cash on hand in the total amount of \$\_\_\_\_\_. Complete Schedule A on back of form.

6. I have other assets over \$500 in value (stocks, bonds, automobile(s), retirement accounts, security, ownership in business). Complete Schedule B on back of form

7. I have equity in real estate in the amount of \$\_\_\_\_\_. Equity is determined by taking the value of your real estate and subtracting the amount that you owe on that real estate.

8. I am married to someone else. Their annual income is \$\_\_\_\_\_.

9. I now pay child support or maintenance in the amount of \$\_\_\_\_\_.

weekly    biweekly    two times per month    monthly

10. I pay day care/child care expenses in the amount of \$\_\_\_\_\_.  
weekly    monthly

**Under penalty of perjury, I swear that this is a true statement.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(COMPLETE OTHER SIDE)

## REMEMBER TO ATTACH PAYSTUBS AND TAX RETURNS

(If sending form via email, please scan and send your attachments in the same email)

<b>SCHEDULE A: CASH ASSETS</b>	
Description of assets (e.g. savings, checking, money market)	Amount of asset

<b>SCHEDULE B: OTHER ASSETS</b>		
Description of assets (e.g. stocks, bonds, automobiles, retirement accounts)	Approximate value of asset	Amount of loan, if any, against asset

<b>SCHEDULE C: HOUSEHOLD</b>			
Name of person	Relationship to applicant Only include, spouse, child, and stepchild	If child/stepchild, under age 18	Percent of time in household
		<input type="radio"/> Yes <input type="radio"/> No	%
		<input type="radio"/> Yes <input type="radio"/> No	%
		<input type="radio"/> Yes <input type="radio"/> No	%
		<input type="radio"/> Yes <input type="radio"/> No	%
		<input type="radio"/> Yes <input type="radio"/> No	%
		<input type="radio"/> Yes <input type="radio"/> No	%
		<input type="radio"/> Yes <input type="radio"/> No	%