

Packet 6

Custody and Child Support Modification

Forms and Procedures

For Wyoming

Joint Packet for Petitioner and  
Respondent

2011

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## **LIST OF FORMS – CHILD CUSTODY MODIFICATION PACKET**

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All underlined forms are required in an uncontested modification action and must be completed and submitted by the Petitioner. In addition, the Petitioner must also complete a Confidential Financial Affidavit. All bold forms are required to be completed and submitted by the Respondent.

# THE STEPS—MODIFICATION OF CUSTODY AND SUPPORT

## (Instructions for both Petitioner and Respondent)

1. **Read all the instructions before completing forms to ensure that you qualify to seek modification of child custody and support in Wyoming. YOU DON'T NEED TO FILL OUT EVERY FORM. ONLY FILL OUT THE FORMS THAT ARE REQUIRED FOR YOUR CASE. Reading these instructions will help you determine which forms you need.**
  
2. **Sufficient change of circumstances to modify/adjust child custody.**
  - a. **Material change in circumstances:** A court may modify an order concerning the care, custody and visitation of the children if there is a showing by either parent of a material change in circumstances since the entry of the order in question and that the modification would be in the best interests of the children pursuant to Wyoming law. (Wyo. Stat. §20-2-201(a)). A condition which existed when the custody order was entered is not a substantial or material change of circumstances.
  - b. **Burden of proof:** It is up to the person trying to modify or change the custody arrangement of the earlier order/decreed to establish that a material and substantial change in circumstances has occurred, following the entry of the initial order.
  - c. **Modifying child support:** Often when a person seeks to modify child custody, child support will also be affected. If that is the situation in your case, this packet includes information to modify child support too.
  
3. **Relevant Child Custody Modification Laws:**
  - a. **Relocation:** moving away, by itself, is not a substantial or material change in circumstances sufficient to justify a change in custody order. *Gurney v. Gurney*, 899 P.2d 52, 55 (Wyo. 1995) (citing *Love*, 851 P.2d at 1288-89). The court will consider the attributes and characteristics of the parents and children and how the children have fared under the original custody and visitation arrangement. The court will also consider whether the relocating parent's motives for proposing the move are legitimate, sincere, in good faith, and whether reasonable visitation is

possible for the remaining parent. *Watt v. Watt*, 1999 WY 4, 971 P.2d 608 (Wyo. 1999).

- b. The court should not refuse to support the efforts of the custodial parent to maintain and enhance their standard of living, even if it means moving away. So long as the court is satisfied with the motives of the custodial parent in seeking the move and reasonable visitation is available to the remaining parent, the courts have held that being able to move away with the children is allowable.
- c. **Judges have broad decision-making authority:** Custody, visitation, child support, and alimony are all committed to the sound discretion of the district court. The welfare and needs of the children are to be given paramount consideration. The determination of the best interests of the child is a question for the judge. A judge's decision is very hard to overturn.
- d. **Joint custody:** because parents must work closely together in joint custody arrangements, it may be easier to reopen an order which contains a joint custody provision and change it so that one person has primary custody and the other parent has visitation.

#### 4. Definitions for child support:

- a. **"Arrearage"** means past due child support, past due medical support, past due spousal support, attorneys fees, guardian *ad litem* fees, costs, interest and penalties, but, does not include property settlements.
- b. **"Obligor"** means a person who owes a duty of support for a child.
- c. **"Payor"** means any employer or other person who pays income to an obligor and includes an employer who has or provides health care coverage to employees.
- d. **"Income"** means *any* form of payment or return in money or in kind to an individual, regardless of source. Income includes, but is not limited to wages, earnings, salary, commission, compensation as an independent contractor, temporary total disability, permanent partial disability, permanent total disability, worker's compensation payments, unemployment compensation, disability, annuity and retirement benefits and any other payments made by any payor.
- e. **The following is not "income":** Means tested sources of income such as Pell Grants, aid under the personal opportunities with employment responsibilities (POWER) program, food stamps and supplemental security income (SSI) shall not be considered as income.
- f. **"Net" income** is the gross income minus total mandatory deductions. **Mandatory deductions:** federal income tax withheld, social security tax (FICA) withheld, state income tax withheld, and other deductions required by law, such as required disability contributions and/or required retirement contributions.

- g. **"Imputed income"** can be used when either parent is voluntarily unemployed or underemployed. In such case the child support shall be computed based upon the potential earning capacity (imputed income) of the unemployed or underemployed parent. If the person is only capable of earning **minimum wage** you might be able to figure his or her **net monthly income at \$1,135.00**. In making that determination the court shall consider:
- 1) Prior employment experience and history;
  - 2) Educational level and whether additional education would make the parent more self-sufficient or significantly increase the parent's income;
  - 3) The presence of children of the marriage in the parent's home and its impact on the earnings of that parent;
  - 4) Availability of employment for which the parent is qualified;
  - 5) Prevailing wage rates in the local area;
  - 6) Special skills or training; and
  - 7) Whether the parent is realistically able to earn imputed income.
- h. **"Age of majority"** means a person eighteen (18) years of age, *except* for purposes of child support obligations, a parent's legal obligation for the support of his or her children, whether natural or adopted, continues past the age of majority in cases where the children are: (i) mentally or physically disabled and thereby incapable of self support; or (ii) between the age of majority and twenty (20) years and attending high school or an equivalent program as full-time participants.

## **5. Relevant Child Support Modification Laws:**

- a. **Recipients of certain public benefits.** Those recipients of aid under the personal opportunities with employment responsibilities (POWER) program who, as a condition of eligibility under federal law, are required to assign their rights to support to, and cooperate with, the department of family services in the establishment of parentage and the establishment, enforcement and modification of support obligations. If you or your children receive public benefits, contact your Department of Family Services caseworker or local child support enforcement office as a modification of child support may have an impact on your benefits. **Wyo. Stat. §20-6-105.**
- b. **Military Personnel:** Military regulations specify that military duty will not be used as a basis for avoiding family support obligations, but setting the level of support is a civilian matter. It is most common to set the support obligation based on basic military pay. You can go to [www.dfas.mil](http://www.dfas.mil) for updates on military pay and many other issues. If military pay and benefits are an issue in your child support case, you may want to contact an attorney for assistance. The following is also a helpful website:

<http://www.acf.hhs.gov/programs/cse/fct/militaryguide2000.htm#determine>.

- c. **Overtime compensation:** Overtime compensation is not counted in the “net income” unless the court, after considering all overtime earnings derived in the preceding twenty-four (24) month period, determines the overtime earnings can reasonably be expected to continue on a consistent basis.
- d. **Entry of income withholding order.** An income withholding order (IWO) enables an employer to take child support out of the pay of the parent obligated to pay. The court always enters an IWO which takes effect immediately, unless the parties agree otherwise, or unless one (1) of the parties demonstrates, and the court finds, that there is good cause not to require immediate income withholding. When the parties agree to an alternative arrangement, the arrangement shall be in writing, signed by the parties and reviewed and entered in the record by the court. The court order has to include the findings of good cause, including a statement explaining why implementation of immediate income withholding would not be in the best interests of the child and, in cases involving modification of child support, proof of timely payments.
- e. **Limits on amounts withheld:** The total amount that can be withheld from any employee's paycheck is limited by the Consumer Credit Protection Act (CCPA). The limits provided in the CCPA are fifty percent (50%) of disposable earnings if the parent who pays child support has a second family and sixty percent (60%) if there is no second family. These limits are each increased by five percent (5%) if payments are in arrears for a period equal to twelve (12) weeks or more.
- f. **Social security or veteran's benefits.** If your children receive part of a parent's social security or veteran benefits, you might want to contact an attorney or legal services program for assistance with child support calculation. If a proportion of a support obligor's (person who is supposed to pay child support) social security or veteran's benefit is paid directly to the custodian of the obligor's children who are the subject of the child support order, the total amount of the social security or veteran's benefit, including the amounts paid to the obligor and custodian under the child support order, shall be counted as gross income to the obligor (count the amount the children receive as income to the parent who has to pay support). Figure out child support and subtract the amount of the social security or veteran's benefit sent directly to the custodial parent from the noncustodial (obligor's) parent's share of presumptive support. If the subtraction of the social security or veteran's benefit sent directly to the custodian results in a negative dollar amount, the support amount shall be set at zero. The child support obligation shall be offset by the amount of the social security or veteran's benefit sent directly to the custodian, beginning from the time the custodian began receiving the social security or veteran's benefit. **Wyo. Stat. §20-2-304(e).**
- g. **When income withholding order becomes effective.** An income withholding order which did not become effective immediately upon entry, becomes effective

upon the earliest of the following: (i) The date the parent paying requests withholding commence; or (ii) child support becomes delinquent in payment of an amount equal to one (1) month's support obligation under the support order.

- h. **Date new amount of child support begins.** An order for child support is not subject to retroactive modification except: (i) Upon agreement of the parties; or (ii) The order may be modified with respect to any period during which a petition for modification is pending, but only from the date notice of that petition was served on the respondent. Wyo. Stat. §20-2-311(d).
- i. **When the child support obligation ends.** An on-going child support obligation terminates when the:
  - (i) Parents marry or remarry *each other* (After the remarriage of the parents to each other, the court may eliminate all child support arrearage existing between the parents except those assigned to the state of Wyoming);
  - (ii) Child dies;
  - (iii) Child is legally emancipated; or
  - (iv) Child attains the age of majority. (See “age of majority” definition above at Paragraph 4(h).)

## **6. Complete the *Petition to Modify Custody and Support and Summons*.**

- a. Make two (2) copies of each document. The original will be filed at the courthouse, one copy is for you (**the petitioner**) and the other copy is for the other parent (**the respondent**). You will need to repeat this step for all documents you file with the court.

**\*\* CONFIDENTIALITY OF ADDRESS OR OTHER IDENTIFYING INFORMATION: If you have concerns about your or your children’s safety if your address or phone number is disclosed, you may want to contact an attorney for advice on potential options or how to obtain a court order allowing you to maintain confidentiality of your address or other identifying information. (See Wyo. Stat. § Wyo. Stat. §20-4-162.**

- b. **Family Violence Option**: If you decide to work through a Child Support Enforcement Agency instead, and you or your children are victims of domestic violence, request information regarding the Family Violence Option as a possible way to keep certain information confidential.
- c. **Notarizing Signatures**. You will need to sign the *Petition to Modify Custody and Support* and have it notarized. Notary publics may administer the oath and witness your signature, or in many cases, clerks of court will be willing to

administer the necessary oath. Each clerk's office has their own policy so check with them first before seeking notarization of your signature on the forms.

**Case Number:** You need to use the same case number assigned to the original order. You must include that case number on all further paperwork in the "**caption**". The caption is the top section of a pleading, motion, or petition stating the name of the petitioner, respondent, court and identifying the case number.

## **7. Petitioner and Respondent must each complete and send to each other the Initial Disclosures.**

- a. **Initial Disclosures.** A special rule was adopted for use in divorce actions. That rule requires certain information be made available at least thirty (30) days after the respondent is served, including a schedule of financial assets; schedule of non-financial assets; schedule of all debts owed individually or jointly; location(s) of safety deposit box(es); employment information; information regarding other income and retirement accounts; and a summary of the facts believed to support the claim of a material change in circumstances to support a change of custody.

Please note that "A party must make its disclosures based on the information then reasonably available to it and is not excused from making its disclosures because it has not fully completed its investigation of the case or because it challenges the sufficiency of another party's disclosures or because another party has not made its disclosures."

**WHEN TO SERVE:** You should fill out an INITIAL DISCLOSURE IMMEDIATELY and send it to the other party (or their attorney if he or she has one) WITHIN 30 DAYS AFTER THE RESPONDENT IS SERVED. DO NOT FILE THE INITIAL DISCLOSURES IN THE COURT.

## **8. Petitioner and Respondent must each fill out a *Confidential Financial Affidavit* and attach all required documents (tax returns for previous two years and statement of earnings for the current year).**

- a. **Confidential Financial Affidavits.** Both parties are required to file a *Confidential Financial Affidavit* with the court with all the necessary supporting

documentation. The other party can obtain a *Confidential Financial Affidavit* by purchasing a pro se packet from the clerk of district court's office or you may copy an affidavit for the other party before you fill it out. If either party fails to file a financial affidavit, the court may require the other party to demonstrate to the court, under oath, an imputed net monthly income for the party not filing. [See *Affidavit of Imputed Income*] If the person is only capable of earning **minimum wage** you might be able to figure his or her **net monthly income at \$814.00**.

1) **Necessary attachments.** Financial affidavits of the parties shall be supported with documentation of both current and past earnings. Include copies of last two years' income tax returns and your most recent pay stub(s) to show how much you have made so far this year. Other suitable documentation of current earnings includes, but is not limited to, employer statements, or receipts and expenses if self-employed. **Wyo. Stat. §20-2-308(b).**

2) Both parents must fill out a *Confidential Financial Affidavit* in order to calculate the child support, otherwise, the court must hold a hearing or get other evidence regarding the income of the parties. If you have information regarding the other party's income for the previous two years, and you are unable to obtain a *Confidential Financial Affidavit* from that party, you may fill out an *Affidavit of Imputed Income*.

## 9. Child Support Payments and Medical Expenses.

- a. The child support guidelines are presumed to be the correct amount and must be followed except in limited circumstances. Attach the *Child Support Computation Form* with your *Confidential Financial Affidavit*.
- b. **Calculating Child Support.** If you need assistance computing child support, you may call an attorney in your community or one of the Legal Services Organizations, including the clinics at the law school. You must have the net monthly income for both parties prior to calling. **It is recommended that you hire an attorney to calculate child support or see if someone knowledgeable will assist you. Also, child support must be paid and cannot be waived.**
- c. **YOU CANNOT agree that no support will be paid.** The statutes allow for a reduced amount of support when you agree on shared physical custody.
- d. **Minimum amount of child support.** Where the combined *net monthly* income of *both* parents is less than eight hundred and thirty three dollars (\$833.00), the non-custodial parent has to pay twenty-five percent (25%) of his/her net income, but the minimum amount of child support a person has to pay can not be less than **fifty dollars (\$50.00) per month for each family**

**unit** in which there are children to whom the non-custodial parent owes a duty of support.

- e. There are NO DEVIATIONS from the presumed support allowed UNLESS the court CHOOSES to deviate from the set amount because the amount was unjust or inappropriate in the particular case.
  - 1) In determining whether to deviate from the presumptive child support established by Wyo. Stat. §20-2-304, the court shall consider the following factors:
    - (i) The age of the child;
    - (ii) The cost of necessary child day care;
    - (iii) Any special health care and educational needs of the child;
    - (iv) The responsibility of either parent for the support of other children, whether court ordered or otherwise;
    - (v) The value of services contributed by either parent;
    - (vi) Any expenses reasonably related to the mother's pregnancy and confinement for that child, if the parents were never married or if the parents were divorced prior to the birth of the child;
    - (vii) The cost of transportation of the child to and from visitation;
    - (viii) The ability of either or both parents to furnish health, dental and vision insurance through employment benefits;
    - (ix) The amount of time the child spends with each parent;
    - (x) Any other necessary expenses for the benefit of the child;
    - (xi) Whether or not either parent has violated any provision of the divorce decree, including visitation provisions, if deemed relevant by the court; and
    - (xii) Other factors deemed relevant by the court.
  - 2) The Court must include the specific reasons for deviation in the ***Order***.
  - 3) **YOU CAN NOT AGREE TO LESS THAN THE PRESUMED SUPPORT IF GOVERNMENT OR STATE BENEFITS (SUCH AS TITLE 19) ARE BEING PROVIDED ON BEHALF OF ANY CHILD.**
- f. Complete an ***Income Withholding Order***. This should be submitted with the ***Order Modifying Child Custody and Support***.
- g. Complete a ***Notice to Payor*** and ask the clerk what the policy is for postage and mailing.
- h. **Medical support.** The law requires that medical support for the child(ren) be included as part of any child support order. The court shall order either or both of the parents to provide medical support, if insurance can be obtained

through an employer or other group carrier, or if it is otherwise reasonably available. This may include dental, optical or other health care needs for the child(ren). In addition, the court will order that any medical expenses not covered by insurance and any deductible amount on the required insurance coverage be paid by one or both parents. If both parents are ordered to pay for expenses not covered by insurance, the court will specify the proportion for which each parent is responsible (for example 50 percent to plaintiff and 50 percent to defendant). **Wyo. Stat. §20-2-401.**

## **10. File the forms with the District Court Clerk.**

- a. **Where to file.** Take your two (2) copies plus the original to the courthouse in the county in which the original action that you are seeking to modify was filed.
- b. **File Stamp.** The clerk will “file-stamp” the documents. This will be proof of the date you filed your *Petition* and other documents with the court.
- c. **Pay the filing fee.** Although the fee for filing a petition is currently \$70.00, many district courts in the state have additional fees. These fees can change each year. Some counties do not accept personal checks. You will need to contact the Clerk of the District Court where you will be filing the *Petition for Modification of Custody and Support* to ask how much the fees are and to inquire as to what type of payment methods they accept.
- d. **Asking the court to waive filing fees and costs of having pleadings served on the other party.** If you financially qualify, you may ask the judge to allow you to file your *Petition for Modification of Custody and Support* and to waive the costs of having the sheriff serve the respondent with the paperwork by completing and filing an *Affidavit of Indigency and Request for Waiver of Filing Fees and All Fees Associated Therewith* together with the *Order on Request for Waiver of Filing Fees and All Fees Associated Therewith*. The judge will then make a determination about whether or not to grant your request. Again, procedures and policies vary from court to court so there *is no guarantee that the judge will grant your request.*

## **11. After the papers are filed with the Clerk, have the respondent officially served by the County Sheriff or a process server.**

- a. **Notice.** You MUST give the respondent (a/k/a “the other party”) **official notice** that you are seeking to modify child support. The respondent must receive a copy of the *Petition for Modification of Custody and Support* and

*Summons* and any documents filed with them (NOTE: this packet is best utilized in uncontested actions and if a temporary or emergency motion is necessary, you may want to contact an attorney for assistance) by a person authorized to serve the papers under Wyoming law. You may not serve the papers yourself unless the respondent signs an *Acknowledgment and Acceptance of Service* in front of a notary or clerk of court and files it with the clerk.

- b. **Deadline to have respondent served.** You will have ninety (90) days from the date you file your *Petition for Modification of Custody and Support* at the courthouse to make sure the respondent is served with the papers. If you fail to timely serve the other party, the lawsuit can (and in many district courts will) be dismissed for lack of progress. See Uniform Rules of District Courts, State of Wyoming, Rule 203.
- c. **Methods to serve respondent.** Choose **ONLY ONE** of the five methods to serve the opposing party.

**Method #1 – Service by Wyoming Sheriff (*Summons*).** Wyoming Rules of Civil Procedure, Rule 4(c), states that “process may be served within the State of Wyoming, by the sheriff of the county where the service is made, or by the under sheriff or deputy.” It is recommended to have the sheriff or deputy in the county where the respondent can be found serve him or her with the papers. There will be a separate service fee (usually \$20.00 in Wyoming). You can contact the sheriff’s department in the county where the respondent lives or can be found to determine the fee charged for the sheriff or deputy to serve the respondent.

**Service by out of state sheriff deputy.** Contact the sheriff’s department in the county where the respondent lives or can be found to determine the fee charged for the sheriff or deputy to serve the respondent.

The sheriff’s office will complete the last page of the *Summons* and usually file the original with the clerk’s office and send you a copy. If you receive a copy, call the clerk’s office to ensure the original has been filed. If not, file the original with the clerk’s office.

**Method #2 – Service by a Private Party (*Summons*).** In some counties and in some states, private parties are available to serve court papers for a fee. Wyoming Rules of Civil Procedure, Rule 4(c)(1) states that the person serving the *Summons* must be of the age of majority and not a party to the action.

**Method #3 – Acknowledgement and Acceptance of Service.** This form of service is appropriate if the other party will accept the papers and sign for them. You or the other party will need to completely fill out the *Acknowledgement and Acceptance of Service*. The other party must sign the document in front of a notary and file the original with the clerk of district court. If you and the respondent are in agreement, it is also a good idea

to fill out the *Order Modifying Custody and Support* and for both you and the respondent to sign the document in front of a notary or, where available, the clerk of court for presentation to the judge.

**Method #4 – Service by Publication.** There are additional fees for publication for this method. Before selecting this method of service, you must completely read and understand Wyoming Rules of Civil Procedure, Rule 4(e) & (f). Rule 4(e) states that service by publication is applicable “in suits for divorce, alimony, to affirm or declare a marriage void, or the modification of any decree therefor entered in such suit, when the respondent is a nonresident of the state, or the respondent’s residence cannot be ascertained, or the respondent keeps concealed in order to avoid service of process.”

**If you do not understand what is involved, see a lawyer.** However, if you have read the rules and can demonstrate that you have made every effort to find the respondent’s address, completely fill out *Affidavit to Allow Service by Publication* and *Publication Notice*. (DO NOT sign where the clerk needs to sign).

Before service of publication can be made, an *Affidavit to Allow Service by Publication* must be filed stating that service of *Summons* cannot be made within this state, on the respondent to be served by publication, and stating the respondent’s address, if known, or that the respondent’s address is unknown.

***If the respondent’s address is UNKNOWN*** and cannot be found, the affidavit must detail the efforts you made to obtain an address.

***If the other party’s address is KNOWN***, Wyoming Rules of Civil Procedure, Rule 4(f) states: In any case in which service by publication is made when the address of the respondent is known, it must be stated in the publication. Immediately after the first publication, the party making the service shall deliver to the clerk copies of the publication, and the clerk shall mail a copy to each respondent whose name and address is known by registered or certified mail and marked “**Restricted Delivery**” with return receipt requested, directed to the respondent’s address listed, and make an entry thereof on the appearance docket [NOTE: you must supply the clerk with the envelope and proper postage – the envelope must be ready to mail with the necessary postal forms completed].

**Contact the newspaper.** After the clerk signs and files the publication notice, it is your responsibility to contact the appropriate newspaper and to arrange for the publication and pay the appropriate fees. An appropriate newspaper is one that has been regularly issued at least once each week for a period of fifty-two (52) consecutive weeks prior to the date of the first publication of notice or advertisements. It must have a paid circulation of at least five hundred (500) and each page must not be less than ten (10) inches by twelve and one-half inches in size. The newspaper must publish the notice once a week for four (4) consecutive weeks.

**Waiting period.** The other party will have thirty (30) days **from the date of the last publication date** to file a written response to the child support modification action. After the thirty (30) day waiting period, fill out, sign and notarize ***Affidavit Following Service by Publication***. This should be filed with the clerk of district court. If the other party fails to respond by that time limit, you may be able to obtain a modification by default. [See Step 6 below].

**Method #5 – Service by Certified or Registered Mail.** In all cases where service by publication can be made (see Method #4 above) or where a statute permits service outside this state, the petitioner may obtain service by registered or certified mail. Wyoming Rules of Civil Procedure, Rule 4(l) provides that “(u)pon the request of any party the clerk shall send by registered or certified mail a copy of the [petition] and ***Summons*** addressed to the party to be served at the address given in the affidavit required under” Rule 4(f).

The mail shall be sent marked “**Restricted Delivery**” requesting a return receipt signed by the addressee or the addressee’s agent who has been specifically authorized in writing by a form acceptable to, and deposited with, the postal authorities. When such return receipt is received signed by the addressee or the addressee’s agent the clerk shall file the same and enter a certificate in the cause showing the making of such service. Wyoming Rules of Civil Procedure, Rule 4(l).

## **12. After the other party is served, wait the required waiting period.**

You must wait the time limit for the other party to respond after service is completed.

- a. **Waiting period if respondent is served in Wyoming.** If the other party is served in Wyoming other than by publication, the other party will have twenty (20) days (starting the day after being served) to respond in writing and to file the response in the clerk’s office.
- b. **Waiting period if respondent is served out of state.** If the other party was served out-of-state OR was served by publication, he/she will have thirty (30) days (starting the day after being served) to respond to the lawsuit.
- c. **Computation of Time Limits.** - In computing most time limits, unless otherwise stated, the day the petition is served shall not be included. The last day of the time period is included, unless it lands on a Saturday, a Sunday, or a legal holiday, or, if the courthouse is closed then the time limit will be on the very next day that the courthouse is open. **If you have questions about time limits you should seek the advice of an attorney.**

**13. Respondent must file a *Response to the Petition* after being served.**

a. **Response to Petition.** If you have been served with a *Petition to Modify Custody and Support*, you should file a *Response to Petition to Modify Custody and Support* with the clerk of the district court where the *Petition to Modify Custody and Support* was filed. A *Response* is a written document explaining to the court exactly which provisions you agree with and which provisions you deny. If you fail to respond, a default judgment will be entered against you and your spouse may be entitled the relief he or she asked for in the *Petition*.

You must fill in the caption. DO NOT forget to include the case number.

b. **Admit or Deny.** To respond to the *Petition*, you should go through each and every paragraph of the *Petition to Modify Custody and Support* and either “admit” or “deny” each paragraph. If you do not have sufficient information to either admit or deny a particular allegation, you must state that in your *Response to Petition to Modify Custody and Support*. If you disagree with something and you fail to “deny” it in your *Response to Petition to Modify Custody and Support*, the judge can find that you admitted it.

c. **Time limit to answer. You have only a limited amount of time to file a Response to Petition to Modify Custody and Support.** Generally, if you were served within the State of Wyoming, you will have 20 days to file the *Response to Petition to Modify Custody and Support*. If you were served by publication, certified mail, or outside the State of Wyoming, you generally will have 30 days to file a *Response to Petition to Modify Custody and Support*. If you do not file a *Response to Petition to Modify Custody and Support* by your deadline, then your spouse may obtain an *Order* giving him/her everything he/she requested in the *Response to Petition to Modify Custody and Support*.

d. **Computation of Time Limits.** - In computing most time limits, unless otherwise stated, the day the pleading is served shall not be included. The last day of the period so computed shall be included, unless it is a Saturday, a Sunday, or a legal holiday, or, when the act to be done is the filing of a paper, a day on which weather or other conditions have made the office of the clerk of the court inaccessible, in which event the period runs until the end of the next day which is not one of the aforementioned days. When the period of time prescribed or allowed is less than 11 days, intermediate Saturdays, Sundays, and legal holidays shall be excluded in the computation. A "legal holiday" includes any day officially recognized as a legal holiday in this state by designation of the legislature or appointment as a holiday by the governor. Wyoming Rules of Civil Procedure Rule 6.

**OR**

a. **You may file a Response and Counterclaim.** If you want the judge to grant relief to you, you should file a *Response and Counterclaim to Petition to Modify Custody and Support*. This document responds to the *Petition to Modify Custody and Support* and gives you an opportunity to tell the court what you want to happen with the child support and judgment of arrears. First, you will go through each and every paragraph of the *Petition to Modify Custody and Support* and either “admit” or “deny” each paragraph. Second, the *Counterclaim* portion of the document asks the judge to give you what you want. You must fill out all of the information in the *Response and Counterclaim to Petition to Modify Custody and Support* completely.

b. **Time limit to answer and counterclaim.** The same time limits apply as the *Response to Petition to Modify Custody and Support* above.

#### **14. If the parties agree on all of the issues:**

a. **Agreement.** Prepare the *Order Modifying Custody and Support* (and *Redacted Order Modifying Custody and Support*). The *Redacted Order Modifying Custody and Support* must contain the same information as the *Order Modifying Custody and Support*, except that it uses only the initials of the minor children, the year of birth for individuals, the last 4 digits of social security numbers, and the last 4 digits of financial account numbers to help protect against identity theft occurring from the use of public documents. If you have any questions about the requirement for a *Redacted Order Modifying Custody and Support*, please review the Wyoming Supreme Court Rules Governing Redactions from Court Records

b. **Other required forms:**

- ✓ *Confidential Financial Affidavits*
- ✓ *Confidential Information Form*
- ✓ *Confidential Statement for Child Support Order* and
- ✓ *Income Withholding Order*
- ✓ *Notice to Payor*

c. **Hearing.** In some counties, a hearing is required before the Judge will sign the *Order Modifying Custody and Support*. You request a hearing by completing the *Request for Setting*. If you have reached an agreement, check the box that states that the parties have entered into a settlement agreement. Indicate how much time you think it will take for you and the other party to present your evidence and write that in (usually 15-minutes if there is an agreement). **The judge will not guide you through the hearing, tell you how to proceed or advise you on the law.**

- d. **Setting the hearing date.** You will file the *Order Setting Hearing* with the clerk's office and they will fill in the hearing date and time and mail a copy to you and the other party. Remember to provide the clerk with self-addressed, stamped envelopes for you and the other party. At the hearing, you will need to inform the judge of the reasons you are seeking modification, the net monthly incomes of both parents, the proposed child support amount, whether it deviates from the child support guidelines and whether any of the children for whom support is owed are receiving means tested income (i.e. food stamps or Medicaid) and give the *Order Modifying Custody and Support* (and *Redacted Order Modifying Custody and Support*) with the appropriate number of copies to the Judge.

**15. If the other party answers and you and the other party do not agree on all the issues:**

- a. **Reply to Counterclaim.** If the other party has filed a counterclaim or counter-petition, you will have a time limit (usually 20-days) to file a written response called a *Reply to Counterclaim*. A copy of your reply will also need to be sent to the other party or the attorney representing the other party and a certificate filed with the court showing what date the copy was put in the U.S. mail, first class with postage pre-paid and the exact name and address of the person it was mailed to. **If you fail to respond in writing in the time allowed, a default judgment can be entered against you.**
- b. **Set a hearing/trial.** Your case will have to be heard and decided by a judge at a trial unless an agreement is reached. It is strongly recommended that you hire an attorney to represent you at trial though you may represent yourself. If you represent yourself, you proceed at your own risk and will be expected to know the laws. See *Request for Setting* above. Check the "trial" box where it asks the type of hearing. Indicate how much time you think it will take for you and the other party to present your evidence and write that in. You also need to check whether or not you want a court reporter. If you request a court reporter, you will be responsible for paying the fees. **You are again reminded that, if you choose to continue without an attorney, you are expected to know what to do and how to do it. The judge will not guide you through the trial/hearing, tell you how to proceed or advise you on the law.**

NOTE: The pro se packets are most beneficial when used for cases where the parties can reach an agreement or one of the parties defaults. If the matter looks as though it is going to require a hearing, you are strongly encouraged to find an attorney willing to help you.

- c. **Order.** Following the hearing, the judge will make a decision. If the judge instructs you, you must take that decision and type it into the *Order Modifying Custody and Support* (and *Redacted Order Modifying Custody and Support*) incorporating the judge's decision.

## 16. If the other party fails to respond, file the default paperwork.

- a. **Default.** After the required waiting period has expired, you may obtain what is referred to as a **default judgment**.
- b. **Necessary forms:**
- ✓ *Application for Entry of Default*
  - ✓ *Affidavit of Petitioner in Support of Default*
  - ✓ *Affidavit Following Service by Publication*
  - ✓ *Entry of Default*.
- c. **Default Order Modifying Custody and Support.** In some counties, you can present the clerk a copy of the *Order* at the same time as the default paperwork is presented. **MAKE SURE TO MARK "DEFAULT" ON THE ORDER.** Confirm the proper procedure with the clerk of court's office. You must have the *Order* completely filled out, with the appropriate copies made. Also provide the clerk with self-addressed stamped envelopes addressed to yourself and the other party.
- d. **Other necessary forms.** Include:
- ✓ *Confidential Financial Affidavits* (If you don't have one from the other party, file an *Affidavit of Imputed Income*)
  - ✓ *Confidential Information Form*
  - ✓ *Confidential Statement for Child Support Order*
  - ✓ *Income Withholding Order* and
  - ✓ *Certificate of Mailing (check with clerk)*
  - ✓ *Notice to Payor* (You may be required to pay the clerk the costs of the mailing (usually less than five (\$5.00) dollars) or have the certified mail forms filled out with the necessary postage attached).
  - ✓ *Self addressed, stamped* envelopes (one addressed to you and one to the other party).
  - ✓ Many counties require an *Affidavit of Imputed Income* when one of the parties does not file a *Confidential Financial Affidavit*.

- e. Make two copies of each of the documents. One copy will be for your records and the other is for the respondent.
- f. Take the originals of the completed documents to the courthouse where you filed your previous documents and ask the clerk to file stamp them and file them with the court. You must also get your copies filed stamped.

**NOTE: Some counties will not enter a default order unless there is a hearing. In those counties, fill out a *Request for Setting* for a default hearing. Request 15 minutes for the hearing. At the hearing make sure you tell the judge the reasons for seeking the child custody and/or support modification and be prepared to present evidence of both parties' income. You will also need to bring the *Order Modifying Custody and Support, Redacted Order Modifying Custody and Support, Confidential Information Form, Confidential Statement for Child Support Order, and Income Withholding Order* to court.**

**Child custody and support will not be modified until the Judge signs the *Order Modifying Custody and Support* and it is filed by the clerk of court. Giving the papers to the clerk does not ensure your order is modified or will be modified. If you do not fill out the paperwork correctly, the Judge will not sign the *Order*.**

## **17. Motions for some action by the court.**

- a. There may be other remedies available in child support modification actions that are not included in these packets. For instance requests for temporary relief are so different and complex that having an attorney assist is highly recommended. For each motion you wish to file, you must complete appropriate pleading(s), as well as a *Request for Setting* and the *Order Setting Hearing*. These must be filed with the clerk's office. The *Request for Setting* allows the court to hear about your motion and to make a ruling regarding your request. It also tells the court what the hearing is for and the amount of time needed. If you require a court reporter, his/her fee must be paid by you before the hearing. The judge's clerk will fill in the hearing date and time and return the *Order Setting Hearing* to you. You must mail a copy to the other party and complete a *Certificate of Service* stating that you have done so.
- b. **If the other party files a motion:** You should fill out a *Response to Motion Form* and state your objections, if any, to the requested relief. If you fail to respond in writing, you may be prevented from responding at the hearing, and the other party may be given what he/she asked for in the motion. Generally, your response must be filed and delivered to the other party within 20-days from the date it was mailed or, if there is a hearing, 3-days before the hearing

date, whichever is sooner. You should attach to your response, any documents or other evidence you wish the Judge to consider. Do not forget to include a *Certificate of Service*.

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

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### PETITION TO MODIFY CUSTODY AND SUPPORT

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Petitioner, respectfully requests this Court modify an order regarding child custody and support, and, if applicable, enter a judgment for arrears/back child support. In support of this petition, the petitioner states the following:

1. Petitioner is the **[Check the appropriate box]**

- custodial parent; or  
 non-custodial parent

and is a resident of \_\_\_\_\_ County, State of \_\_\_\_\_

2. **[Check the appropriate box]**

A child support order was entered on \_\_\_\_\_ **[date]** by this Court; or

A child support order was entered on \_\_\_\_\_ **[date]** by the \_\_\_\_\_ Court, \_\_\_\_\_ County, State of \_\_\_\_\_

3. **CHILD CUSTODY JURISDICTION:** This court made the original child custody determination and has exclusive, continuing jurisdiction to modify the order concerning the care, custody and visitation of the children. The child, the child's parents or any person acting as a parent presently reside in this state. (If this court did not enter the original order or if neither party or the child(ren) continues to reside in this state, seek the advice of an attorney.)

4. **REQUIRED INFORMATION FOR CHILDREN:** The following information is required for each child, unless you have a court order or are operating under another law allowing you to maintain confidentiality of addresses or other identifying information. If the information in paragraphs 5 through 8 is not furnished, the court, upon

motion of a party or its own motion, may stay the proceeding until the information is furnished. (Attach a separate sheet, if necessary.)

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

5. **OTHER CASES INVOLVING CHILD(REN):** State whether you have participated as a party or witness or *in any capacity* in any other proceeding (court cases) concerning the custody, allocation of decision-making, or visitation/parenting time of any of the children listed in this *Petition* in this *or any other state*: (If yes, please be specific regarding case number, court, state and nature of case, date of child-custody determination, if any, and child(ren)'s initials: \_\_\_\_\_

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

6. **OTHER PROCEEDINGS, INCLUDING PROTECTION ORDERS:** State whether you have any information of any custody proceeding that could affect the current proceeding, including proceedings for enforcement and civil and criminal proceedings relating to domestic violence, protective orders, termination of parental rights and adoptions, and if so, identify the court, the state, the case number and the nature of the proceeding and child(ren)'s initials: \_\_\_\_\_

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

7. **CUSTODY AND VISITATION RIGHTS OF OTHERS:** The following people are not parties in this matter, but have physical custody of the child(ren) or claim rights of parental responsibilities, legal custody or physical custody, or visitation/parenting time with the child(ren) (names and addresses of those persons): \_\_\_\_\_

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

8. The Order listed in Paragraph 2: **[Check the appropriate box]**

The Order has not been modified or changed in this state or any other state with respect to the child support and medical insurance obligations; OR

The Order was last modified with respect to the child support and/or medical insurance obligations by order of this Court on \_\_\_\_\_  
\_\_\_\_\_ **[date]**; or

The Order was last modified with respect to the child support and/or medical insurance obligations by Order of the \_\_\_\_\_ Court,  
\_\_\_\_\_ County, State of \_\_\_\_\_, on \_\_\_\_\_  
\_\_\_\_\_ **[date]**.

9.  Attached is a certified copy of the custody order to be modified as required by Wyo. Stat. §20-2-203(c). According to the terms of the most recent court order, custody and visitation was ordered as follows: \_\_\_\_\_

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

10. *If child support was also ordered*, according to the terms of the most recent court order: **[Check the appropriate boxes for each section]**

A. The non-custodial parent is required to pay \$\_\_\_\_\_ per month in child support for the parties' minor child(ren) named in paragraph 4. The non-custodial parent is **[Check one box]**

in arrears (owes back child support). (A copy of the record of child support payments certified as a true copy of the original by the custodian of the record [Clerk of District Court or Child Support Enforcement] may be attached and/or forwarded to the court. The copy is evidence of facts asserted in it, and is admissible to show whether payments were made. Wyo. Stat. §20-4-166(c)). If applicable, the amount of arrears is \$\_\_\_\_\_ through the date of the filing of this Petition. A judgment should be entered against the non-custodial parent for this amount and any additional amounts which may accrue prior to entry of an order in this action.

current (not in arrears) for the child support obligation.

B. The  custodial  non-custodial parent is required to provide medical insurance for the child(ren). Such insurance  has  has not been provided as ordered.

C. The non-custodial parent was  required  not required to pay for a percentage of medical expenses not covered by insurance. Such medical expenses  have  have not been paid as ordered. If the non-custodial parent has not paid medical expenses as ordered, the total amount owed is \$ \_\_\_\_\_ through the date of the filing of this Petition (attach copies of bills/receipts, if available). A judgment should be entered against the non-custodial parent for this amount and any additional amounts that are owed prior to entry of an order in this action.

D.  Neither party has been ordered to provide medical insurance. Petitioner is requesting this Court order \_\_\_\_\_ **[Name]** to provide medical insurance and that all medical expenses not covered by insurance be divided in the following manner: \_\_\_\_\_% to be paid by Mother and \_\_\_\_\_% to be paid by Father.

12. Reason for seeking modification of child custody. Since the date of the last order, a material change in circumstances has occurred which warrants modifying the child custody and/or child support obligations. The change in circumstances is: [Please describe] \_\_\_\_\_

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13. That because of the substantial and material change in circumstances, it is in the best interests of the child(ren) to have the following custody/visitation arrangements: \_\_\_\_\_

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**THEREFORE**, Petitioner respectfully requests:

1. The Court set a hearing on the *Petition to Modify Custody and Support*;
2. The parties be ordered to complete and file *Confidential Financial Affidavits* as provided by Wyo. Stat. § 20-2-308;

3. The Court review and modify the child custody to an arrangement in the best interests of the child(ren);
4. The Court review and modify the child support order to an amount consistent with the Wyoming Child Support Guidelines;
5. The Court review and modify the medical insurance obligation and the allocation of costs not covered by medical insurance, if requested.
6. If applicable, the Court enter a judgment for child support arrears and for unpaid medical expenses not covered by medical insurance.
7. Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
8. For such other and further relief as the Court deems necessary and just.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
 Signature

Printed Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
 ) ss.  
 COUNTY OF \_\_\_\_\_ )

Subscribed and sworn to before me by \_\_\_\_\_, this  
 \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Witness my hand and official seal.

\_\_\_\_\_  
 Notary Public/Clerk of Court

My commission expires:

-----Fill in, if applicable-----  
Pursuant to Rule 102(a)(1)(B) of the Wyoming Uniform Rules of District Court the following attorney has participated in the preparation of this pleading but said attorney is NOT deemed to have entered an appearance in this matter:

\_\_\_\_\_  
Attorney's Name

Attorney's Address/Telephone:

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

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

SUMMONS

Respondent: \_\_\_\_\_ )  
(Print name of other party)

To the above named Respondent:

Print Respondent's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Employer Name & Address: \_\_\_\_\_

YOU ARE HEREBY SUMMONED and required to file with the Clerk and serve upon the Petitioner or Petitioner's attorney if s/he has one, an answer to the Petition which is herewith served upon you, within 20 days after service of this Summons upon you, exclusive of the day of service. (If service upon you is made outside of the state of Wyoming, you are required to file and serve your answer to the Petition within 30 days after service of this Summons upon you, exclusive of the day of service). If you fail to do so, judgment by default will be taken against you for the relief demanded in the Petition.

Dated \_\_\_\_\_, 20\_\_\_\_\_.

(Seal of District Court)

\_\_\_\_\_  
Clerk of Court

By: \_\_\_\_\_

Deputy Clerk \_\_\_\_\_

\_\_\_\_\_  
Petitioner

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

STOP: SHERIFF WILL FILL THIS OUT (Attach to Summons)

**RETURN**

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

TO BE USED BY WYOMING SHERIFF, UNDER  
SHERIFF OR DEPUTY

I, \_\_\_\_\_, Sheriff in and for said County of \_\_\_\_\_, in the State aforesaid, do hereby certify that I received the within Summons, together with a copy of the Petition filed in the above entitled matter, and that I served the same in the County aforesaid on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by delivering a copy of the same, together with a copy of the Petition, to

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

\_\_\_\_\_  
Sheriff  
By: \_\_\_\_\_  
Deputy Sheriff

Sheriff's fees: Service, \$ \_\_\_\_\_; Return \$ \_\_\_\_\_  
Mileage \$ \_\_\_\_\_; Total \$ \_\_\_\_\_

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

**AFFIDAVIT OF SERVICE**

STATE OF \_\_\_\_\_ )  
 )ss TO BE USED BY A PERSON OTHER THAN WYOMING  
COUNTY OF \_\_\_\_\_ ) SHERIFF, UNDER SHERIFF OR DEPUTY

\_\_\_\_\_, being first duly sworn, on oath deposes and says that he/she is the identical person appointed by the Clerk of the Court as above shown to make service of Summons issued in the foregoing action; that he is over the \_\_\_\_\_ years and is not a party to the foregoing action or interested therein, and that he made service of said Summons in the County aforesaid on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by delivering a copy of the same, together with a copy of the Petition, to:

Name: \_\_\_\_\_

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

By: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

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### RESPONSE TO PETITION FOR MODIFICATION CUSTODY AND SUPPORT

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The Respondent sets forth the following as the answers and responses to the *Petition for Modification of Custody and Support*:

1. Respondent admits the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that are accurate statements)  
of the *Petition for Modification of Custody and Support*.

2. Respondent denies the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that you believe are not accurate)  
of the *Petition for Modification of Custody and Support*.

3. Defendant does not have information sufficient to either admit or deny the  
allegations in Paragraphs \_\_\_\_\_ of the *Petition for*  
(list paragraphs that are accurate statements)  
*Modification of Custody and Support*.

**WHEREFORE**, Respondent respectfully requests that the court find generally in her/his favor and against the Petitioner, that Petitioner take nothing by way of his/her *Petition for Modification of Custody and Support*, and for such other and further relief as the court deems just and proper.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature

Printed Name: \_\_\_\_\_

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

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

-----Fill in, if applicable-----  
Pursuant to Rule 102(a)(1)(B) of the Wyoming Uniform Rules of District Court the following attorney has participated in the preparation of this pleading but said attorney is NOT deemed to have entered an appearance in this matter:

\_\_\_\_\_  
Attorney's Name

Attorney's Address/Telephone:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

---

**RESPONSE AND COUNTERCLAIM TO  
PETITION FOR MODIFICATION OF CUSTODY AND SUPPORT**

---

The Respondent sets forth the following as the answers and responses to the *Petition for Modification of Custody and Support*:

1. Respondent admits the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that are accurate statements)  
of the *Petition for Modification of Custody and Support*.
2. Respondent denies the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that you believe are not accurate)  
of the *Petition for Modification of Custody and Support*.
3. Defendant does not have information sufficient to either admit or deny the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that are accurate statements)  
of the *Petition for Modification of Custody and Support*.

**WHEREFORE**, Respondent respectfully requests that the court find generally in her/his favor and against the Petitioner, that Petitioner take nothing by way of his/her *Petition for Modification of Custody and Support*, and for such other and further relief as the court deems just and proper.

---

**COUNTERCLAIM**

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**RESPONDENT** sets forth the following as the counterclaim to the *Petition for Modification of Custody and Support*:

1. Petitioner is the **[Check the appropriate box]**

- custodial parent; or
- non-custodial parent

and is a resident of \_\_\_\_\_ County, State of \_\_\_\_\_

2. **[Check the appropriate box]**

A child support order was entered on \_\_\_\_\_ **[date]** by this Court;  
or

A child support order was entered on \_\_\_\_\_ **[date]** by the \_\_\_\_\_  
\_\_\_\_\_ Court, \_\_\_\_\_ County, State of \_\_\_\_\_.

3. **CHILD CUSTODY JURISDICTION:** This court made the original child custody determination and has exclusive, continuing jurisdiction to modify the order concerning the care, custody and visitation of the children. The child, the child's parents or any person acting as a parent presently reside in this state. (If this court did not enter the original order or if neither party or the child(ren) continues to reside in this state, seek the advice of an attorney.)

4. **REQUIRED INFORMATION FOR CHILDREN:** The following information is required for each child, unless you have a court order or are operating under another law allowing you to maintain confidentiality of addresses or other identifying information. If the information in paragraphs 5 through 8 is not furnished, the court, upon motion of a party or its own motion, may stay the proceeding until the information is furnished. (Attach a separate sheet, if necessary.)

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

Child's Initials: \_\_\_\_\_

Year of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

Name(s) of person(s) with whom child/ren lived during the past 5 years	Beginning Date	Ending Date	Present address of person(s) with whom child(ren) lived during this period

5. **OTHER CASES INVOLVING CHILD(REN):** State whether you have participated as a party or witness or *in any capacity* in any other proceeding (court cases) concerning the custody, allocation of decision-making, or visitation/parenting time of any of the children listed in this *Petition* in this *or any other state*: (If yes, please be specific regarding case number, court, state and nature of case, date of child-custody determination, if any, and child(ren)'s initials: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. **OTHER PROCEEDINGS, INCLUDING PROTECTION ORDERS:** State whether you have any information of any custody proceeding that could affect the current proceeding, including proceedings for enforcement and civil and criminal proceedings relating to domestic violence, protective orders, termination of parental rights and adoptions, and if so, identify the court, the state, the case number and the nature of the proceeding and child(ren)'s initials: \_\_\_\_\_

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7. **CUSTODY AND VISITATION RIGHTS OF OTHERS:** The following people are not parties in this matter, but have physical custody of the child(ren) or claim rights of parental responsibilities, legal custody or physical custody, or visitation/parenting time with the child(ren) (names and addresses of those persons): \_\_\_\_\_

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8. The Order listed in Paragraph 2: **[Check the appropriate box]**

The Order has not been modified or changed in this state or any other state with respect to the child support and medical insurance obligations; OR

The Order was last modified with respect to the child support and/or medical insurance obligations by order of this Court on \_\_\_\_\_ **[date]**; or

The Order was last modified with respect to the child support and/or medical insurance obligations by Order of the \_\_\_\_\_ Court, \_\_\_\_\_ County, State of \_\_\_\_\_, on \_\_\_\_\_ **[date]**.

9.  Attached is a certified copy of the custody order to be modified as required by Wyo. Stat. §20-2-203(c). According to the terms of the most recent court order, custody and visitation was ordered as follows: \_\_\_\_\_

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10. *If child support was also ordered*, according to the terms of the most recent court order: **[Check the appropriate boxes for each section]**

A. The non-custodial parent is required to pay \$ \_\_\_\_\_ per month in child support for the parties' minor child(ren) named in paragraph 4. The non-custodial parent is **[Check one box]**

in arrears (owes back child support). (A copy of the record of child support payments certified as a true copy of the original by the custodian of the record [Clerk of District Court or Child Support Enforcement] may be attached and/or forwarded to the court. The copy is evidence of facts asserted in it, and is admissible to show whether payments were made. Wyo. Stat. §20-4-166(c)). If applicable, the amount of arrears is \$\_\_\_\_\_ through the date of the filing of this Petition. A judgment should be entered against the non-custodial parent for this amount and any additional amounts which may accrue prior to entry of an order in this action.

current (not in arrears) for the child support obligation.

B. The  custodial  non-custodial parent is required to provide medical insurance for the child(ren). Such insurance  has  has not been provided as ordered.

C. The non-custodial parent was  required  not required to pay for a percentage of medical expenses not covered by insurance. Such medical expenses  have  have not been paid as ordered. If the non-custodial parent has not paid medical expenses as ordered, the total amount owed is \$\_\_\_\_\_ through the date of the filing of this Petition (attach copies of bills/receipts, if available). A judgment should be entered against the non-custodial parent for this amount and any additional amounts that are owed prior to entry of an order in this action.

D.  Neither party has been ordered to provide medical insurance. Petitioner is requesting this Court order \_\_\_\_\_ [Name] to provide medical insurance and that all medical expenses not covered by insurance be divided in the following manner: \_\_\_\_\_% to be paid by Mother and \_\_\_\_\_% to be paid by Father.

12. Reason for seeking modification of child custody. Since the date of the last order, a material change in circumstances has occurred which warrants modifying the child custody and/or child support obligations. The change in circumstances is: [Please describe] \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. That because of the substantial and material change in circumstances, it is in the best interests of the child(ren) to have the following custody/visitation arrangements:  
\_\_\_\_\_

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WHEREFORE, Respondent respectfully requests:

- 1. The Court set a hearing on the *Response and Counterclaim to Petition for Modification of Custody and Support*.
- 2. The parties be ordered to complete and file *Confidential Financial Affidavits* as provided by Wyo. Stat. § 20-2-308;
- 3. The Court review and modify the child support order to an amount consistent with the Wyoming Child Support Guidelines;
- 4. The Court review and modify the medical insurance obligation and the allocation of costs not covered by medical insurance, if requested.
- 5. If applicable, the Court enter a judgment for child support arrears and for unpaid medical expenses not covered by medical insurance.
- 6. Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 7. For such other and further relief as the Court deems necessary and just.

STATE OF WYOMING )  
 ) ss.  
 COUNTY OF \_\_\_\_\_ )

The Defendant, \_\_\_\_\_, under the penalty of perjury, verifies that she/he has read the *Counterclaim*, knows the contents of the *Counterclaim*, and that the statements in the *Counterclaim* are true to the best of her/his own knowledge. (Truthfulness. It is absolutely essential that you be completely honest and accurate in completing all forms. There are penalties for attempting to mislead the court. You should read Wyoming Rules of Civil Procedure, Rule 11 (representations to court) and Wyoming Statute § 6-5-301 (perjury).)

**DATED** this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
 Signature  
 Printed Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public / Court Clerk

My Commission Expires:

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

-----Fill in, if applicable-----

Pursuant to Rule 102(a)(1)(B) of the Wyoming Uniform Rules of District Court the following attorney has participated in the preparation of this pleading but said attorney is NOT deemed to have entered an appearance in this matter:

\_\_\_\_\_  
Attorney's Name

Attorney's Address/Telephone:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
 (Print name of person filing) )  
 )  
vs. )  
 )  
Respondent: \_\_\_\_\_, )  
 (Print name of other party) )

Civil Action Case No. \_\_\_\_\_

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**ORDER REQUIRING COMPLETION  
OF CONFIDENTIAL FINANCIAL AFFIDAVITS**

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An action seeking establishment of a child support order pursuant to Wyo. Stat. §20-2-301 et seq., as amended has been filed;

NOW THEREFORE IT IS HEREBY ORDERED that the parties complete and sign under oath a “Confidential Financial Affidavit” in accordance with Wyo. Stat. §20-2-308 in a form substantially conforming to that approved by the Wyoming Supreme Court and available through the clerk of this court.

IT IS FURTHER ORDERED THAT the financial affidavits of the parties shall be supported with documentation of both current and past earnings. Suitable documentation of current earnings includes but is not limited to pay stubs, employer statements, or receipts and expenses if self-employed. Documentation of current earnings shall be supplemented with copies of the most recent tax return to provide verification of earnings over a longer period.

IT IS FURTHER ORDERED that, attached to the financial affidavit, each party shall file with the clerk of this court and supply to the other party the following information:

- 1) Copies of the last two years income tax returns;
- 2) Copies of **all** W-2 forms from the last two years; and
- 3) Copies of statements of earnings from each employer showing cumulative pay for this year to date. **Parents who are self-employed must supply verified income and expense statements from their business for the two most recent years.**

IT IS FURTHER ORDERED that the completed Confidential Financial Affidavit be returned within 30 days from the date of this order to the other party or his/her attorney and to the following:

Clerk of District Court  
Address:

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

IT IS FURTHER ORDERED that after the parties have exchanged financial information they shall either jointly or separately complete a Child Support Computation form in an attempt to settle child support issues. The parties are encouraged to agree to a temporary and a final support order set according to the Wyoming Child Support Guidelines.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
District Court Judge

Copies sent to:

Petitioner's name and address: \_\_\_\_\_

Respondent's name and address: \_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_  
JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )  
 )  
vs. )  
 )  
Respondent: \_\_\_\_\_ )  
(Print name of other party) )

Civil Action Case No. \_\_\_\_\_

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**CONFIDENTIAL  
FINANCIAL AFFIDAVIT  
W.S. §20-2-308**

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A financial affidavit must be completed by each parent. You must attach copies of your tax returns and W-2 forms for the most recent two years and a copy of a cumulative earning statement for the current year. **Parents who are self-employed must supply verified income and expense statements from their business for the two most recent years.**

All financial affidavits and records required by law to be attached to the affidavit shall constitute a confidential file and are subject to inspection by persons other than the parties, their attorneys or the department of family services to the extent necessary to enforce the Child Support Enforcement Act and the Uniform Interstate Family Support Act only by court order. (Wyo. Stat. § 20-2-308(d))

**THE UNDERSIGNED, (Print Name)** \_\_\_\_\_, hereby swears or affirms, under penalty of perjury, that the following answers are correct and complete.

**PERSONAL INFORMATION**

1. Your name: (First, Middle, Last) \_\_\_\_\_  
Gender:  Male  Female
2. (a) Your present address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Your home phone number: ( ) \_\_\_\_\_

A message phone number: ( ) \_\_\_\_\_

How long have you resided at this location? \_\_\_\_\_

(b) If your mailing address is different than the above address, please provide your mailing address:

\_\_\_\_\_

3. Your Social Security Number is: \_\_\_\_\_

4. Check all that apply:  Employed  Self-Employed  Both  Unemployed

**Parents who are self-employed must supply verified income and expense statements from their business for the last two years.**

5. (a) Your present employer: \_\_\_\_\_

(b) Employer's address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Employer's phone: \_\_\_\_\_

(c) Your occupation: \_\_\_\_\_

6. Your work experience for the last three years is as follows:

COMPANY AND LOCATION	DATES FROM - TO	JOB DESCRIPTION/TITLE	SALARY OR WAGE	REASON YOU LEFT

7. (a) Your education is: \_\_\_\_\_ years high school; \_\_\_\_\_ years college; \_\_\_\_\_ years trade school; \_\_\_\_\_ years other \_\_\_\_\_.

(b) List your degree(s) or certificate(s) in \_\_\_\_\_.

8. List the children you are legally responsible for supporting and *who live with you*:

Child's Name	Birth Date	Social Security No.	COURT AND DATE OF ORDER	SUPPORT/MONTH	ARREARS (Amount Past Due)

9. List any court-ordered support obligation for children who *do not* live with you:

Child's Name	Birth Date	Social Security No.	COURT AND DATE OF ORDER	SUPPORT/MONTH	ARREARS (Amount Past Due)

10. If you are the parent of any children *not named above*, list them below:

Child's Name	Birth Date	Social Security No.	COURT AND DATE OF ORDER	SUPPORT/MONTH	ARREARS (Amount Past Due)

11. If you contribute to the support of any children for whom you have no legal obligation, list below:

Child's Name	Birth Date	Social Security No.	Does this child live with you?	OTHER PARENT'S NAME AND ADDRESS	YOUR RELATIONSHIP TO THE CHILD
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No		

12. List all child(ren) involved in this civil matter:

Child's Name	Birth Date	Social Security No.	Does this child live with you?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

13. Do you owe back child support (arrears) in this case? If so, how much? \$\_\_\_\_\_.

14. Do you owe back child support (arrears) on any other child support obligations? If so, how much? (List **total of all support arrearages for all children, except this case**). \$\_\_\_\_\_.

15. Means tested benefits (POWER Program, Health Care Benefits under Title XIX of the Social Security Act or similar state program, General Assistance, Food Stamps, Supplemental Security Income, etc.) are being provided to your children, as follows:

CHILD'S NAME	BIRTH DATE	STATE	TYPE OF BENEFIT	AMOUNT OF BENEFIT

**INCOME & EXPENSE INFORMATION**

16. (a) List pay dates or otherwise describe pay schedule: \_\_\_\_\_
- weekly
  - every two weeks
  - twice per month (i.e. 1<sup>st</sup> and 15<sup>th</sup> of every month)
  - monthly
  - annually

My gross income\*\* (before deductions) is: \$\_\_\_\_\_ per month. (Convert annual, bi-monthly, and weekly amounts to monthly amounts).

**\*\* Gross income (includes tips, commission and bonuses). Monthly amounts are calculated by multiplying weekly amount by 52 and dividing by 12; multiplying bi-weekly amounts by 26 and dividing by 12; and multiplying semi-monthly amounts by 24 and dividing by 12.**

(b) Please list the deductions taken out of your check by your employer:  
**(Please provide copies of pay-stubs for all payroll deductions)**

Mandatory Deductions		Voluntary Deductions, Continued	
Federal Income Tax		Health, Dental, Vision Insurance	
Social Security Tax		Dues	
Medicare Tax		Bonds	
Current child support for other children		Stock Purchase Plan	
Retirement/Pension deductions (mandatory deductions only)		Flex Benefit Cafeteria Plan	
Other -		Disability Insurance	
Other -		Life Insurance	
<b>Voluntary Deductions</b>		Charity	
Bank/Credit Union (savings)		Child Care	
Bank/Credit Union (loan)		Other -	
Retirement/Deferred Compensation		Other -	
Filing Status: _____		<b>Total Monthly Deductions:</b>	\$
No. of Dependents Claimed: _____		<b>Total Monthly Net Income***</b>	\$

**\*\*\* Net income means gross income less personal income taxes, social security deductions, cost of dependent health care coverage for all dependent children, actual payments being made under preexisting support order for current support of other children, other court-ordered support obligations currently being paid and mandatory pension deductions. Payments towards child support arrearage shall not be deducted to arrive at net income.**

(c) How many hours do you work each week?  
 Regular \_\_\_\_\_ Overtime \_\_\_\_\_ Total \_\_\_\_\_  
 Is the overtime listed above expected to continue on a consistent basis?  YES  NO  
 How often do you receive overtime compensation? \_\_\_\_\_

(d) Date of your last salary increase or decrease: \_\_\_\_\_.

17. **YOUR INCOME FROM ALL OTHER SOURCES** (Include the monthly average of annual or sporadic income; also include any government benefits):

AMOUNT	INCOME SOURCE	ADDRESS OF SOURCE

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18. Has anyone been ordered to provide health insurance, or is there any other medical provision in an existing court order?

Check one:  YES  NO

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

19. Are the child(ren) involved in this case covered by health insurance?

Check one:  YES  NO

If yes, list the children covered below:

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

**You must provide current written proof from your insurance carrier verifying the names of the actual person(s) covered under your policy.**

20. **Attached to this affidavit are:**

**1) copies of my last two years income tax returns,**

**2) copies of my W-2 Forms for the last two years, and**

**3) copies of statements of earnings from each of my employers showing**

**cumulative pay for this year. Parents who are self-employed must supply verified income and expense statements from their business for the two most recent years.**

### **PERJURY STATUTE**

21. Wyoming Statute § 6-5-301, (1977, as amended) [Perjury] provides:

(a) A person commits perjury if, while under a lawfully administered oath or affirmation, he knowingly testifies falsely or makes a false affidavit, certificate, declaration, deposition or statement, in a judicial, legislative or administrative proceeding in which an oath or affirmation may be required by law, touching a matter material to a point in question.

(b) Perjury is a felony punishable by imprisonment for not more than five (5) years, a



**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

**DO NOT FILE WITH CONFIDENTIAL FINANCIAL AFFIDAVIT.**  
**FOR COMPUTATION PURPOSES ONLY.**  
**EFFECTIVE JULY 1, 2005.**

§ 20-2-304. Presumptive child support:

**(i) One (1) child:**

Net Monthly Income of Both Parents	Percentage of Income Allocated For One Child	Base Support Plus Marginal Percentage
\$ 833.00	26.2	\$ 218.00 + 24.3% over \$ 833.00
\$ 2,083.00	25.1	\$ 522.00 + 23.3% over \$ 2,083.00
\$ 2,917.00	24.6	\$ 716.00 + 12.9% over \$ 2,917.00
\$ 3,750.00	22.0	\$ 824.00 + 10.7% over \$ 3,750.00
\$ 5,000.00	19.2	\$ 958.00 + 9.9% over \$ 5,000.00
\$ 6,667.00	16.8	\$ 1,122.00 + 9.4% over \$ 6,667.00
\$ 8,958.00	14.9	\$ 1,338.00 + 5.9% of anything over \$8,958.00

**(ii) Two (2) children:**

Net Monthly Income of Both Parents	Percentage of Income Allocated For Two Children	Base Support Plus Marginal Percentage
\$ 833.00	36.8	\$ 307.00 + 33.8% over \$833.00
\$ 2,083.00	35.0	\$ 729.00 + 31.9% over \$2,083.00
\$ 2,917.00	34.1	\$ 995.00 + 16.4% over \$2,917.00
\$ 3,750.00	30.2	\$ 1,131.00 + 13.1% over \$3,750.00
\$ 5,000.00	25.9	\$ 1,295.00 + 12.5% over \$5,000.00
\$ 6,667.00	22.5	\$ 1,503.00 + 12.5% over \$6,667.00
\$ 8,958.00	20.0	\$ 1,790.00 + 7.0% of anything over \$8,958.00

**(iii) Three (3) children:**

Net Monthly Income of Both Parents	Percentage of Income Allocated For Three Children	Base Support Plus Marginal Percentage
\$ 833.00	42.7	\$ 356.00 + 38.7% over \$ 833.00
\$ 2,083.00	40.3	\$ 840.00 + 36.4% over \$ 2,083.00
\$ 2,917.00	39.2	\$ 1,144.00 + 16.8% over \$ 2,917.00
\$ 3,750.00	34.2	\$ 1,284.00 + 13.3% over \$ 3,750.00
\$ 5,000.00	29.0	\$ 1,450.00 + 13.7% over \$ 5,000.00
\$ 6,667.00	25.2	\$ 1,677.00 + 12.2% over \$ 6,667.00
\$ 8,958.00	21.9	\$ 1,958.00 + 7.7% of anything over \$8,958.00

**(iv) Four (4) children:**

Net Monthly Income of Both Parents	Percentage of Income Allocated For Four Children	Base Support Plus Marginal Percentage
\$ 833.00	47.6	\$ 397.00 + 43.2% over \$ 833.00
\$ 2,083.00	45.0	\$ 937.00 + 40.6% over \$ 2,083.00
\$ 2,917.00	43.7	\$ 1,275.00 + 18.7% over \$ 2,917.00
\$ 3,750.00	38.2	\$ 1,431.00 + 14.8% over \$ 3,750.00
\$ 5,000.00	32.3	\$ 1,616.00 + 15.2% over \$ 5,000.00
\$ 6,667.00	28.1	\$ 1,870.00 + 13.7% over \$6,667.00
\$ 8,958.00	24.4	\$ 2,183.00 + 8.6% of anything over \$8,958.00

**(v) Five (5) or more children:**

Net Monthly Income of Both Parents	Percentage of Income Allocated For Five Children	Base Support Plus Marginal Percentage
\$ 833.00	52.4	\$ 436.00 + 47.5% over \$ 833.00
\$ 2,083.00	49.5	\$ 1,030.00 + 44.7% over \$ 2,083.00
\$ 2,917.00	48.1	\$ 1,403.00 + 20.6% over \$ 2,917.00
\$ 3,750.00	42.0	\$ 1,575.00 + 16.3% over \$ 3,750.00
\$ 5,000.00	35.6	\$ 1,778.00 + 16.8% over \$ 5,000.00
\$ 6,667.00	30.9	\$ 2,057.00 + 15.0% over \$ 6,667.00
\$ 8,958.00	26.8	\$ 2,402.00 + 9.4% of anything over \$ 8,958.00

**DO NOT FILE WITH CONFIDENTIAL FINANCIAL AFFIDAVIT.**  
**FOR COMPUTATION PURPOSES ONLY. EFFECTIVE JULY 1, 2005.**

**CHILD SUPPORT COMPUTATION FORM**

<b>A. COMPUTATION OF BASIC SUPPORT OBLIGATIONS: WYO. STAT. §20-2-304</b>		
1.	Mother's Net Monthly Income:	\$
2.	Father's Net Monthly Income:	\$
3.	Combined Net Monthly Income:	\$
4.	Using the support tables for presumptive support at Wyo. Stat. § 20-6-304 (a) the basic joint support obligation of the parents.	\$
5.	Mother's Proportionate Share: Line 1/Line 3 x Line 4 =	\$
6.	Father's Proportionate Share: Line 2/Line 3 x Line 4 =	\$
		\$
		SUPPORT DUE

NOTE: If the custody of the children is shared or split as defined under Wyo. Stat. § 20-2-304 (c) and (d) other formulas apply. If "split" (meaning each parent has physical custody of at least one (1) child), the amount shall be allocated to each parent based upon the number of those children in the physical custody of that parent (See subsection C below). If "shared" with each parent having actual overnight custody of the children for a certain percentage of time, the amount will be allocated based on the percentage of time, see below.

<p><b>B. SHARED CUSTODY:</b> Wyo. Stat. § 20-2-304 (c) provides for special support computation of support when each parent keeps the children overnight for more than forty percent (40%) of the year <i>and</i> both parents contribute substantially to the expenses of the children <i>in addition to</i> the payment of child support. If this is the custodial arrangement, support may be computed as follows assuming all other statutory provisions apply.</p>				
7.	a) Percent of year children will reside overnight with mother.	_____ %	b) percent of year children will reside overnight with father.	_____ %
8.	Mother's support obligation: Line 5 x Line 7b			\$ _____
9.	Father's support obligation : Line 6 x Line 7a			\$ _____
10.	MONTHLY SUPPORT DUE: The difference between lines 8 and 9 represents the net monthly support due from the parent having the greater support obligation.			\$ _____

<p><b>C. SPLIT CUSTODY:</b> Wyo. Stat. §20-2-304 (d) provides for special computations of support when each parent has physical custody of at least one (1) child. In such cases the support should be computed as follows:</p>		
11.	Joint presumptive support per child: Line 4 ÷ Total children of parents.	\$ _____
12.	Mother's support obligation for children in custody of father: Line 1/Line 3 x Number of children with father x Line 11	\$ _____
13.	Father's support obligation for children in custody of mother: Line 2/Line 3 x Number of children with mother x Line 11	\$ _____
14.	MONTHLY SUPPORT DUE: The difference between lines 12 and 13 represents the net monthly support due from the parent having the greater support obligation.	\$ _____

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

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### AFFIDAVIT OF IMPUTED INCOME

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(Only use this form if you are unable to get the other party to complete a  
*Confidential Financial Affidavit*)

I, \_\_\_\_\_, of lawful age, first being duly sworn upon my  
(print name)  
oath, depose and state as follows:

1. I am the  Petitioner  Respondent in the above-captioned matter.
2. I am not able to get a *Confidential Financial Affidavit* from the other party because: \_\_\_\_\_.
3. The other party has certifications, degrees, education or training relevant to his/her employability as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Explain, to the best of your knowledge, the other party's work history or other sources of income for the previous two years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. His/her income for this year is unknown, as she/he has not provided financial information and has failed, neglected or otherwise refused to file a *Confidential Financial Affidavit*.
6. I  do  do not have copies of the last two year's income tax returns showing the amount earned by  Petitioner  Respondent. ATTACH

ANY TAX RETURNS, W-4s, CHECK STUBS OR OTHER  
INFORMATION ABOUT THE OTHER PARTY'S INCOME TO THIS  
DOCUMENT.

If you have information about the other parent's previous or current employment by area and occupation, you may be able to get information regarding wages by visiting the U.S. Department of Labor Bureau of Labor Statistics website for wage information by area and occupation <http://www.bls.gov/bls/blswage.htm>. Attach any relevant documentation to this Affidavit.

7.  Petitioner's  Respondent's income is based on him/her being paid:

- \_\_\_\_\_ weekly  
\_\_\_\_\_ every two weeks  
\_\_\_\_\_ twice per month (i.e. 1<sup>st</sup> and 15<sup>th</sup> of every month)  
\_\_\_\_\_ monthly  
\_\_\_\_\_ annually

Convert annual, bi-weekly, bi-monthly, and weekly amounts to *monthly* amounts below.

**\*\* Gross income (includes tips, commission and bonuses.) Monthly amounts are calculated by multiplying weekly amount by 52 and dividing by 12; multiplying bi-weekly amounts by 26 and dividing by 12; and multiplying semi-monthly amounts by 24 and dividing by 12; annually by dividing by 12.** If only the "gross income" is known, multiply that number by .25 (or other number if instructed by Court) and then subtract that amount from the gross to arrive at the net monthly income. **If the other party has a history of only working for minimum wage or less, and is capable, to your knowledge of working 40 hours/week, the court may impute his/her income at \$1,135.00 net monthly for a noncustodial parent and \$1,160.50 net monthly for a custodial parent.** You may call your local child support enforcement office for more information on imputing a custodial or non-custodial parent's wage. Federal minimum wage is \$7.25/hour as of July 1, 2009.

8.  Petitioner's  Respondent's estimated gross income (before deductions) is: \$\_\_\_\_\_ *per month*, to the best of my information and belief.

"Income" means any form of payment or return in money or in kind to an individual, regardless of source. Income includes, but is not limited to wages, earnings, salary, commission, compensation as an independent contractor, temporary total disability, permanent partial disability and permanent total disability, worker's compensation payments, unemployment compensation, disability, annuity and retirement benefits, and any other payments made by any payor, but shall not include any earnings derived from overtime work unless the court, after considering all overtime earnings derived in the preceding twenty-four (24) month period, determines the overtime earnings can reasonably be expected to continue on a consistent basis. In determining income, all reasonable unreimbursed legitimate business expenses shall be deducted. Means tested sources of income such as Pell grants, aid under the personal opportunities with employment responsibilities (POWER) program, food stamps and supplemental security income (SSI) shall not be considered as income. Gross income also means potential income of parents who are voluntarily unemployed or underemployed.

**"Net income"** means income as defined in footnote 1, less personal income taxes, social security deductions, cost of dependent health care coverage for all dependent children, actual payments being made under preexisting support orders for current support of other children, other court-ordered support obligations currently being paid and mandatory pension deductions. Payments towards child support arrearage shall not be deducted to arrive at net income.



**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT

\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_, )  
(Print name of other party) )

---

**ACKNOWLEDGEMENT AND ACCEPTANCE OF SERVICE**

---

I, \_\_\_\_\_, hereby  
(Print Respondent's Name)  
acknowledge receipt of a copy of the *Petition For Modification of Custody and Support* filed in this case and the *Summons* issued by the clerk. I waive any requirement for other service of process (Rule 4(m)(2)(v), Wyoming Rules of Civil Procedure). I agree to answer or otherwise plead within 20 days from this date (30 days if copies of the papers were received outside of Wyoming). I understand that if I fail to file a response or other pleadings with the clerk of this court and serve the same upon the Petitioner in accordance with the Wyoming Rules of Civil Procedure within the time limits stated, I will be in default and Petitioner may be afforded the relief demanded in the *Petition for Modification of Custody and Support* without a trial or other hearing.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_\_.

WITNESS my hand and notary seal.

\_\_\_\_\_  
Notary Public / Court Clerk

My Commission Expires:

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_.)  
(Print name of other party)

---

**REQUIRED INITIAL DISCLOSURES  
PURSUANT TO WYOMING RULES OF CIVIL PROCEDURE 26(a)(1.1)**

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The following initial disclosures, are submitted by  Petitioner  Respondent pursuant to Wyoming Rule of Civil Procedure 26(a)(1.1). This information is required to the extent that the information pertains to a particular claim or defense in the action. This information must be made available to the opposing party's attorney or the opposing party if he or she does not have an attorney for the modification action within thirty (30) days after the defendant has been served with the *Petition for Modification of Custody and Support*. For any of the following disclosures that do not pertain to you, write "not applicable" on the appropriate schedule.

1. A schedule of financial assets owned individually or jointly, such as savings or checking accounts, stocks, bonds, cash or cash equivalents, including the name and address of the depository, the date such account was established, the type of account, the account number, and whether the account is acknowledged to be a marital asset or asserted to be a non-marital asset and, if asserted to be a non-marital asset, an explanation of the legal and factual basis for such assertion. (See attached **Schedule of Financial Assets.**)

2. A schedule of non-financial assets, such as personal or real property (i.e. house, land, vehicles, household items, etc.) owned individually or jointly, including the purchase price

and the date of purchase or acquiring the property, the present market value, any indebtedness relating to such asset, the state of record ownership, whether purchased from marital assets or obtained by gift or inheritance, and whether acknowledged to be a marital asset or asserted to be a non-marital asset and, if asserted to be a non-marital asset, an explanation of the legal and factual basis for such assertion. (See attached **Schedule of Non-Financial Assets.**)

3. A schedule of all debts owed individually or jointly, identifying the date any obligation was incurred, the spouse in whose name the debt was incurred, the present amount of all debts and monthly payments, the use to which the money was put which caused the debt to arise, identification of any asset which serves as security for such debt, and an acknowledgement of whether each debt is a marital or non-marital debt, and if asserted to be a non-marital debt, an explanation of the legal and factual basis for such assertion. (See attached **Schedule of Debts.**)

4. A schedule of safe deposit boxes, including the name and address of the institution where the box is located, the box number, the name and address of the individual(s) who has access to the box, an inventory of the contents, and the value of the assets located therein. (See attached **Schedule of Safety Deposit Boxes.**)

5. A schedule of employment, including the name and address of your employer; gross monthly wage; payroll deduction(s), specifically identifying the type and amount; the amount of other benefits including transportation, employer contributions to health care, and employer contributions to retirement accounts; and outstanding bonuses. (See attached **Schedule of Employment.**)

6. A schedule of all other sources of income, including the name and address of the source and the amount and date the income was received. (See attached **Schedule of Other Income.**)

7. A schedule of all retirement accounts or benefits, including the name and address of the institution holding the accounts or benefits, the present value if readily ascertainable, the initial date of any account, the expected payment upon retirement and the specific retirement date, and the value of the account at the date of the marriage if the account existed prior to marriage. (See attached **Schedule of Retirement Accounts or Benefits.**)

8. If seeking custody, or a change in custody, set forth the facts believed to support your claim of superior entitlement to custody. In addition, as to a change of custody, set forth the facts comprising a substantial change in circumstances and disclose any supporting documentation. (See attached **Schedule of Custody**.)

9. **NOTE: *Supplementation of disclosures and responses.*** Wyoming Rules of Civil Procedure 26(e)(1): A party who has made a disclosure or responded to a request for discovery with a disclosure or response is under a duty to supplement or correct the disclosure or response to include information thereafter acquired, if ordered by the court or in the following circumstances:

**A party is under a duty to supplement at appropriate intervals, its disclosures if the party learns that in some material respect the information disclosed is incomplete or incorrect and if the additional or corrective information has not otherwise been made known to the other parties during the discovery process or in writing.**

DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

### Schedule of Financial Assets

Pursuant to Wyoming Rule 26(a)(1.1)(A)  
*Required effective July 1, 2008*

<b><u>Type of Account:</u></b> Savings, Checking, Stocks, Bonds, Cash or Cash Equivalent	<b><u>Name of Financial Institution:</u></b> bank, credit union, or other financial institution	<b><u>Address of Financial Institution:</u></b>	<b><u>Date Account Opened</u></b> (Month/Day/Year)	<b><u>Last 4 Digits of Account No.</u></b>	<b><u>Asserted as marital or non-marital asset?</u></b> (If non-marital, explain legal & factual basis) (Please attach a separate piece of paper if more space is needed, and label the paper.)

**Schedule of Non-Financial Assets**  
Pursuant to Wyoming Rule 26(a)(1.1)(B)  
*Required effective July 1, 2008*

<b>Item</b>	<b>Purchase Price</b>	<b>Date Acquired/ Purchased</b>	<b>Present Market Value</b>	<b>Debt Related to Asset</b>	<b>State of Record Ownership (Where item is registered or located)</b>	<b>Purchased w/ Marital Assets, Gift, or Inheritance</b>	<b>Asserted as marital or non-marital asset? (If non-marital, explain legal &amp; factual basis) (Please attach a separate piece of paper if more space is needed, and label the paper.)</b>





**Schedule of Employment**

Pursuant to Wyoming Rule 26(a)(1.1)(E)

*Required effective July 1, 2008*

<b>Name of Employer</b>	<b>Address of Employer</b>	<b>Gross Monthly Wages (Before tax and payroll deductions are taken out)</b>	<b>Payroll Deductions (Specify type &amp; amount)(Examples: Social Security, taxes, retirement, health insurance)</b>	<b>Amount of other benefits, including transportation and employer contribution to health care &amp; retirement accounts</b>	<b>Outstanding Bonuses (owed to you, but not yet received)</b>

**Schedule of Other Income**  
Pursuant to Wyoming Rule 26(a)(1.1)(F)  
*Required effective July 1, 2008*

Name of all sources of other income)*	Address of source of other income	Amount Received	Date Received (Month/Day/Year)

\*“Income” means any form of payment or return in money or in kind to an individual, regardless of source. Income includes, but is not limited to wages, earnings, salary, commission, compensation as an independent contractor, temporary total disability, permanent partial disability and permanent total disability, worker’s compensation payments, unemployment compensation, disability, annuity and retirement benefits and any other payments made by any payor.

**Schedule of Retirement Accounts or Benefits**

Pursuant to Wyoming Rule 26(a)(1.1)(G)

*Required effective July 1, 2008*

<b>Name of institution holding account</b>	<b>Address of institution where account is located</b>	<b>Present value of account</b>	<b>Date account was opened (Month/Day/Year)</b>	<b>Expected payment upon retirement &amp; specific date of retirement</b>	<b>Value of account at date of marriage</b>

**Schedule of Custody**

Pursuant to Wyoming Rule 26(a)(1.1)(H)

*Required effective July 1, 2008*

<b>Party seeking custody or a change in custody should state the facts believed to support the claim of why he or she should have custody of the children:</b>	<b>As to a change of custody, the party seeking a change of custody should state any facts that show a substantial change in circumstances and attach any documents that support the change in custody:</b>

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_.)  
(Print name of other party)

---

**AFFIDAVIT TO ALLOW SERVICE BY PUBLICATION**

---

STATE OF WYOMING )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

The Petitioner, being duly sworn upon her/his oath and being of legal age, states and alleges as follows:

1. I am the Petitioner in the above referenced matter. Service of a *Summons* cannot be made within this state on the Respondent.
2.  The Respondent's address is: (if unknown, got to #3)

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

NOTE: Immediately after the first publication, you must deliver to the clerk of district court a copy of the publication notice and an envelope to be sent by certified mail/restricted delivery addressed to Respondent with proper postage. The Clerk shall then mail the notice and make an entry on the appearance docket. (Rule 4(f) Wyoming Rules of Civil Procedure).

**OR**

3.  The Respondent's address is unknown and cannot with reasonable diligence be ascertained. Publication is allowed in this family law matter pursuant to Rule 4(e)(9) Wyoming Rules of Civil Procedure. Thus I have made the following efforts to obtain the Respondent's address:

- I have called him/her and the telephone number is disconnected and directory assistance has no other telephone number.
- I have written the Respondent and my letter was returned [a copy is attached].
- I have contacted the Respondent's known relatives and they cannot supply a current address.
- Other: \_\_\_\_\_

4. I am requesting service by publication in this action as it is an action pursuant to Rule 4 (e) (9) of the Wyoming Rules of Civil Procedure.

FURTHER, I swear under penalty of perjury that the information I have provided on this form is true and correct.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Signature  
 Printed Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

WITNESS my hand and notary seal.

\_\_\_\_\_  
 Notary Public / Court Clerk

My commission expires:

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

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### NOTICE OF PUBLICATION

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NOTICE TO \_\_\_\_\_, RESPONDENT

CURRENT ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

You are notified that a *Petition for Modification of Custody and Support*, Civil Action No. \_\_\_\_\_, has been filed in the Wyoming District Court for the \_\_\_\_\_ Judicial District, whose address is \_\_\_\_\_, seeking to modify child custody and child support, if appropriate. Unless you file a *Response* or otherwise respond to this *Petition* within 30 days following the last date of publication of this notice, a *Default Judgment* will be taken against you and an *Order Modifying Custody and Support* will be granted.

**DATED** this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

BY CLERK OF COURT:

\_\_\_\_\_  
Clerk of District Court / Deputy

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT

\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_.)  
(Print name of other party)

---

**AFFIDAVIT FOLLOWING SERVICE BY PUBLICATION**

---

The Petitioner, being duly sworn upon her/his oath and being of legal age, states and alleges as follows:

1. I am the Petitioner in the above-referenced matter.
2.  The Respondent's address was known and Respondent resided out-of-state. The Respondent was served by publication once a week for four consecutive weeks and more than 30 days have elapsed since the date of the last publication. A copy of the *Affidavit of Publisher* is attached. A copy of the notice was sent by the Clerk of District Court, certified mail to the Respondent; and  
 a copy of the green card was signed and is included in the court's file; or  
 the letter was not signed for, see envelope in the court file.

**OR**  The Respondent's address was unknown despite diligent efforts to discover the address. The Respondent was served by publication once a week for four consecutive weeks. More than 30 days have elapsed since the last publication. A copy of the *Affidavit of Publisher* is attached.

FURTHER, your affiant sayeth not.

DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

WITNESS my hand and notary seal.

\_\_\_\_\_  
Notary Public / Court Clerk

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_.)  
(Print name of other party)

---

**AFFIDAVIT TO ALLOW SERVICE BY REGISTERED OR CERTIFIED MAIL**

---

STATE OF WYOMING )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

The Petitioner-Affiant, being duly sworn upon her/his oath and being of legal age, hereby states and alleges as follows:

1. I am the Petitioner in the above referenced matter. Service of *Summons* cannot be made within the state.
2. The Respondent's address is: \_\_\_\_\_  
\_\_\_\_\_
3. In accordance with Wyoming Rules of Civil Procedure 4(1)(2), upon the request of any party the clerk shall send by registered or certified mail a copy of the *Petition for Modification of Custody and Support* and *Summons* addressed to the party to be served at the address given in this affidavit. The mail shall be sent marked "**Restricted Delivery**", requesting a return receipt signed by the addressee or the addressee's agent who has been specifically authorized in writing by a form acceptable to, and deposited with, the postal authorities. When such return receipt is received signed by the addressee or the addressee's agent, the clerk shall file the same and enter a certificate in the cause showing the making of such service.
4. That I am requesting service by certified mail because the Respondent cannot be served within the state.

FURTHER, I swear under penalty of perjury that the information provided in this form is true and correct.

DATED this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Signature \_\_\_\_\_

Printed name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

WITNESS my hand and notary seal.

\_\_\_\_\_  
Notary Public / Court Clerk

My commission expires:

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )  
 )  
vs. )  
 )  
Respondent: \_\_\_\_\_ )  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

---

**APPLICATION FOR ENTRY OF DEFAULT**

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The Petitioner submits this *Application for Entry of Default* for a default judgment against the Respondent, \_\_\_\_\_, who has been served the *Petition for Modification of Custody and Support* according to the *Certificate of Service* dated \_\_\_\_\_, and has failed to reply to or otherwise respond, and the time allowed by law for doing so has now expired. Application is made to enter the default against the Respondent according to law.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature

Printed Name: \_\_\_\_\_

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

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_.

WITNESS my hand and notary seal.

\_\_\_\_\_  
Notary Public / Court Clerk

My commission expires:

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
 (Print name of person filing) )  
 )  
vs. )  
 )  
Respondent: \_\_\_\_\_ )  
 (Print name of other party)

Civil Action Case No. \_\_\_\_\_

---

**AFFIDAVIT OF PETITIONER IN SUPPORT OF DEFAULT**

---

STATE OF WYOMING )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

THE PETITIONER, who is of lawful age being first duly sworn deposes and states as follows:

1. Petitioner has filed a *Petition for Modification of Custody and/or Support* in this case.
2.  The Respondent was served with a copy of the *Petition* and *Summons* by a duly authorized Deputy or the Sheriff of \_\_\_\_\_ County, State of \_\_\_\_\_ on \_\_\_\_\_. OR  
 (insert date)  
 An *Affidavit to Allow Service by Publication* was filed and the Respondent was served by publication in the \_\_\_\_\_ Newspaper on the following dates: \_\_\_\_\_ OR  
 The Respondent filed an *Acceptance of Service* acknowledging that on \_\_\_\_\_ (insert date) he/she received a *Petition for Modification* and the *Summons*. OR  
 The Respondent was served with a copy of the *Petition* and *Summons* by Certified Mail, Restricted Delivery, Return Receipt requested on \_\_\_\_\_ (insert date), as evidenced by the green postal signature card attached.
3. More than  20 days (if served in Wyoming);  30 days (if served outside of Wyoming by publication or by Certified Mail), excluding the day of service, has elapsed since the date of service.

4. That the Respondent failed to answer or otherwise plead as required by law. The Respondent is not a minor nor incompetent and is not in the military service of the United States. This Affidavit is executed for the purpose of enabling Petitioner to obtain an *Entry of Default* against the Respondent.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature

Printed Name: \_\_\_\_\_

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

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

Subscribed and sworn to before me by \_\_\_\_\_ this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Witness my hand and official seal.

\_\_\_\_\_  
Notary Public / Court Clerk

My Commission Expires:

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_.)  
(Print name of other party)

---

### ENTRY OF DEFAULT

---

The Clerk of District Court, pursuant to the  Petitioner's  Respondent's *Application for Entry of Default and Affidavit in Support of Default*, does hereby enter default against the  Petitioner  Respondent for failure to plead or otherwise defend as provided by the Wyoming Rules of Civil Procedure, as appears from examination of the records and files herein or the return upon the original *Summons* filed in this cause.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

CLERK OF THE DISTRICT COURT

BY: \_\_\_\_\_

Copies sent to:

Petitioner's name and address: \_\_\_\_\_

Respondent's name and address: \_\_\_\_\_

**Clerk of District Court**  
**Addresses**

**First Judicial District,  
Laramie County**

Clerk of District Court  
P.O. Box 787  
Cheyenne, Wyoming 82003  
(307) 633-4270

**Second Judicial District,  
Albany County**

Clerk of District Court  
P.O. Box 1106  
Laramie, Wyoming 82070  
(307) 721-2508

**Second Judicial District,  
Carbon County**

Clerk of District Court  
P.O. Box 67  
Rawlins, Wyoming 82301  
(307) 328-2628

**Third Judicial District,  
Lincoln County**

Clerk of District Court  
925 Sage Avenue  
Kemmerer, Wyoming 83101  
(307) 877-3320

**Third Judicial District,  
Sweetwater County**

Clerk of District Court  
P.O. Box 430  
Green River, WY 82935  
(307) 872-6448

**Third Judicial District,  
Uinta County**

Clerk of District Court  
P.O. Box 1906  
Evanston, Wyoming 82931  
(307) 783-0456

**Fourth Judicial District,  
Johnson County**

Clerk of District Court  
76 North Main  
Buffalo, Wyoming 82834  
(307) 684-7271

**Fourth Judicial District,  
Sheridan County**

Clerk of District Court  
224 S. Main Street, Suite B11  
Sheridan, Wyoming 82801  
(307) 674-2960

**Fifth Judicial District, Big  
Horn County**

Clerk of District Court  
P.O. Box 670  
Basin, Wyoming 82410-0670  
(307) 568-2381

**Fifth Judicial District, Hot  
Springs County**

Clerk of District Court  
415 Arapahoe  
Thermopolis, Wyoming  
82443  
(307) 864-3323

**Fifth Judicial District, Park  
County**

Clerk of Court  
P.O. Box 1960  
Cody, Wyoming 82414-1960  
(307) 527-8690

**Fifth Judicial District,  
Washakie County**

Clerk of District Court  
P.O. Box 862  
Worland, Wyoming 82401  
(307) 347-4821

**Sixth Judicial District,  
Campbell County**

Clerk of District Court  
P.O. Box 817  
Gillette, Wyoming 82717  
(307) 682-3424

**Sixth Judicial District,  
Crook County**

Clerk of District Court  
P.O. Box 904  
Sundance, Wyoming 82729  
(307) 283-2523

**Sixth Judicial District,  
Weston County**

Clerk of District Court  
1 West Main  
Newcastle, Wyoming 82701  
(307) 746-4778

**Seventh Judicial District,  
Natrona County**

Clerk of District Court  
P.O. Box 2510  
Casper, Wyoming 82602  
(307) 235-9243

**Eight Judicial District,  
Converse County**

Clerk of District Court  
107 North 5th St  
Douglas, Wyoming 82633  
(307) 358-3165

**Eight Judicial District,  
Goshen County**

Clerk of District Court  
P.O. box 818  
Torrington, Wyoming  
82240-0818  
(307) 532-2155

**Eight Judicial District,  
Niobrara County**

Clerk of District Court  
P.O. Box 1318  
Lusk, Wyoming 82225  
(307) 334-2736

**Eight Judicial District,  
Platte County**

Clerk of District Court  
P.O. Box 158  
Wheatland, Wyoming 82201  
(307) 322-3857

**Ninth Judicial District,  
Fremont County**

Clerk of District Court  
P.O. Box 370  
Lander, Wyoming 82520  
(307) 332-1134

**Ninth Judicial District,  
Sublette County**  
Clerk of District Court  
P.O. Box 764  
Pinedale, Wyoming 82941  
(307) 367-4376

**Ninth Judicial District,  
Teton County**  
Clerk of District Court  
P.O. Box 4460  
Jackson, Wyoming 83001  
(307) 733-2533

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

---

### ORDER MODIFYING CUSTODY AND SUPPORT

---

**THIS MATTER** having come before the Court upon the *Petition for Modification of Custody and Support*; and by: **[check one]**

- Default (and *Entry of Default* has been issued)
- Stipulation/agreement of the parties (Both parties have signed the document)
- Hearing in Court/Trial

The Court hereby **FINDS**:

1. An Order establishing custody and support was entered by the \_\_\_\_\_ Court, \_\_\_\_\_ District, State of \_\_\_\_\_, case/docket number \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ [year].

2. In the Order,  Mother  Father was granted custody of the parties' minor child[ren] and  Mother  Father was ordered to pay \$\_\_\_\_\_ per month in child support and  Mother OR  Father OR  Mother and Father was/were ordered to provide medical insurance coverage.

3. Respondent was served with the *Petition for Modification of Custody and Support*; **[check one]**:

- Personally on the following date \_\_\_\_\_ in the following state: \_\_\_\_\_.
- By publication. (*Copy of Affidavit of Publication must be filed.*)

- Respondent accepted service. (*Acknowledgement and Acceptance of Service* filed with court and Respondent's signature must be notarized.)
- By *Registered or Certified Mail*. (Return receipt must be filed and Clerk must have entered certificate of service.)

4. Respondent filed

- a response/answer
- a counter-petition/counterclaim (if so, did petitioner file a reply to counterclaim?)  yes  no
- no response (default must be entered, unless there is a waiver of right to answer).
- no response but both parties have signed and agreed to the entry of this Order.

5. A substantial and material change in circumstances exists and it is in the best interest of the child(ren) to modify custody.

6. **CHILDREN AFFECTED BY THIS CASE:**

Full Name	Current Address	Date of Birth day/mo/yr	Place of Birth State

7. **PRESUMPTIVE CHILD SUPPORT CALCULATION** [See Instructions and Child Support Computation Form]

A. In accordance with Wyo. Stat. §20-2-304, Monthly Presumptive Child Support for \_\_\_\_\_ **[insert number]** child(ren) is as follows:

- 1. Father's net monthly income is: \$ \_\_\_\_\_
- 2. Mother's net monthly income is: \$ \_\_\_\_\_
- 3. Total child support obligation of both parents is: \$ \_\_\_\_\_
- 4. Father's presumptive child support obligation is: \$ \_\_\_\_\_

5. Mother's presumptive child support obligation is: \$ \_\_\_\_\_

**B. CHECK ONE:**

- The child(ren) receive(s) means tested income;  
 The child(ren) DO NOT receive(s) any means tested income.

**8. JUDGMENT OF ARREARS: [Check all the boxes that apply]**

Mother or  Father owes back child support in the amount of \$ \_\_\_\_\_ from \_\_\_\_\_ [Date of previous support order] through \_\_\_\_\_ [Last day of the month before this Order is filed] for which judgment shall be entered; and/or

Mother and/or  Father owe(s) unpaid medical expenses in the amount of \$ \_\_\_\_\_ from \_\_\_\_\_ [Date of the order establishing medical support] through \_\_\_\_\_ [Last day of the month before this Order is filed], for which judgment shall be entered.

**IT IS HEREBY ORDERED THAT:**

**9. CUSTODY, VISITATION AND/OR PARENTING TIME: [Check the boxes that apply]**

**A.  BASIC PARENTING PLAN: (If this plan does not fit your situation, see B. (Other Parenting Plan) below OR G. (Supervised Visitation) below.**

**A.1. Primary residential/physical custody**  Mother **OR**  Father shall have the primary care, custody and control of the parties' minor child(ren).

**A.2. Weekend Parenting Time/Visitation**  
The child(ren) shall spend time with  Mother  Father  
 every  every other  other (specify) \_\_\_\_\_ weekend from \_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

**A.3. Weekday Parenting Time/Visitation (If applicable)** The child(ren) shall spend time with  Mother  Father during the week as follows:

Specify days: \_\_\_\_\_

**A.4. Other Parenting Time/Visitation Schedule for Basic Parenting Plan:** (specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B.  **OTHER PARENTING PLAN**

B.1 **MOTHER:** The child(ren) shall spend time with mother on the following days and times:

WEEKENDS:  every  every other  other (specify) \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

WEEKDAYS: Specify days: \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify time) (specify time)

OTHER: (specify) \_\_\_\_\_

B.2. **FATHER:** The child(ren) shall spend time with father on the following days and times:

WEEKENDS:  every  every other  other (specify) \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

WEEKDAYS: Specify days: \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify time) (specify time)

OTHER: (specify) \_\_\_\_\_

C. **SUMMER SCHEDULE. (Choose one)**

Mother  Father shall have parenting time/visitation with the parties' child(ren) beginning \_\_\_\_\_

and continuing until \_\_\_\_\_

(i.e. Ten days after school lets out from 5:00 p.m. and continuing until ten days prior to school starting up again at 5:00 p.m.)

**AND**

**SUMMER WEEKEND PARENTING TIME/VISITATION (If applicable)**

The child(ren) shall spend time with  Mother  Father  
 every  every other  other (specify) \_\_\_\_\_ weekend from \_\_\_\_\_  
\_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

**AND**

**SUMMER WEEKDAY PARENTING TIME/VISITATION (If applicable) In**

the summer, the child(ren) shall spend time with  Mother  Father during the week as follows:

Specify days: \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify time) (specify time and day, if applicable)

**OR**

The schedule during the summer will remain the same as during the school year;

**OR**

The schedule during the summer will remain the same as during the school year, except as follow: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

**OTHER SUMMER PARENTING TIME/VISITATION SCHEDULE**  
(specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. HOLIDAY SCHEDULE:** The following holiday schedule will take priority over the regular weekday, weekend, and summer schedules described above. Fill in the boxes below to indicate where the child(ren) will be for the holidays. Provide beginning and ending times. If a holiday is not specified as even, odd, or every year with one parent, then the child(ren) will remain with the parent they are normally scheduled to be with.

**D.1. SPRING VACATION** (The weekday days of school Spring Break).

**CHOOSE ONE**

The child(ren) will alternate spending spring break with each parent, spending it with  Mother  Father in even years and with  Mother  Father in odd years.

The child(ren) will spend part of spring break with each parent (provide details): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other spring break arrangements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TIME & PLACE OF EXCHANGE** From \_\_\_\_\_ a.m./p.m. the day after school lets out until \_\_\_\_\_ a.m/p.m. the day prior to school beginning after the break.

**OTHER TIME & PLACE OF EXCHANGE:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TRANSPORTATION**

Mother or  Father shall pick up the child(ren) from \_\_\_\_\_ [insert location] at the beginning of the vacation and  Mother  Father shall pick up the child(ren) at the end of the vacation from \_\_\_\_\_ (location)

**OTHER TRANSPORTATION PLANS** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**D.2. CHRISTMAS (indicate either entire vacation period, half of the vacation period to each parent or other)**

Parent spending time with child(ren)	Odd numbered years	Even numbered years	All Years	Beginning and Ending Time & Place of exchange
<input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	
<input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	

**TRANSPORTATION**

Mother or  Father shall pick up the child(ren) from \_\_\_\_\_ [insert location] at the beginning of the vacation and  Mother  Father shall pick up the child(ren) at the end of the vacation from \_\_\_\_\_ (location)

**OTHER TRANSPORTATION PLANS** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**D.3. OTHER HOLIDAYS (be very specific about dates or days, times and where exchanges are to going to take place and by whom).**

Event	Name of party spending time with child(ren)	Odd numbered years (X)	Even numbered years (X)	All Years	Time & Place of exchange
<input type="checkbox"/> Mother's Day					
<input type="checkbox"/> Memorial Day					
<input type="checkbox"/> Father's Day					
<input type="checkbox"/> July 4 <sup>th</sup>					
<input type="checkbox"/> Labor Day					
<input type="checkbox"/> Thanksgiving Break					
<input type="checkbox"/> Thanksgiving Day					
<input type="checkbox"/> Winter Break					
<input type="checkbox"/> Child(ren)'s Birthdays					
<input type="checkbox"/> Religious Events					
<input type="checkbox"/> Other Holiday Events					

E. **PRIORITY:** The following priorities shall apply to the parenting/visitation schedule:

When parents are using an alternating weekend plan and the holiday schedule would result in one parent having the child(ren) for three weekends in a row, the alternating weekend pattern will restart so neither parent will go without having the child(ren) for more than two weekends in a row.

If a parent has the child(ren) on a weekend with an unspecified holiday or non-school day attached, they shall have the child(ren) for the holiday or non-school day.

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

F. **TEMPORARY CHANGES TO THE SCHEDULE.**

Any schedule for sharing time with the child(ren) may be changed as long as both parents agree to the changes ahead of time:  in writing;  by speaking to each other (choose one).

Activities scheduled that will affect the other parent's time must be coordinated with the other parent.

**Makeup and Missed Parenting Time:** Only substantial medical reasons will be considered sufficient for postponement of parenting time. If a child is ill and unable to spend time with a parent, a makeup parenting time will be scheduled. If a parent fails to have the child(ren) during their scheduled parenting time for any other reason, there will be no makeup of parenting time unless the parents agree otherwise:  in writing  by speaking to each other (choose one).

G.  **SUPERVISED OR NO VISITATION** (Check and complete only if supervised or no visitation is ordered):

G.1. The  mother  father shall have **no visitation** with the minor child(ren) and this is best for the child(ren) for the following reasons:

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**OR**

G.2. The  mother  father shall have **supervised** visitation with the minor child(ren) for the following reasons:

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Visitation may only take place in the presence of another person as listed below or as otherwise approved by the Court.

Name of Supervisor:

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Visitation shall occur on the following days/times:

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The cost of supervised visitation will be paid by  Mother  Father OR  shared equally.

10. **PERMANENT CHANGES TO THE SCHEDULE.**

Once the judge signs this *Order*, any changes that the parents do not agree on can be made only by applying to the court for a modification. One parent cannot change a court-ordered Parenting Plan or Visitation Schedule on their own.

11. **PARENT-CHILD COMMUNICATION.**

Both parents and child(ren) shall have the right to communicate by telephone, in writing or by e-mailing during reasonable hours without interference or monitoring by the other parent.

Procedures for telephone, written, or e-mail access (describe ground rules for parent-child communication): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

12. **MUTUAL RESPECT.** Parents will not say things or knowingly allow others to say things in the presence of their child(ren) that would take away the child(ren)'s love and respect for the other parent.

13. **ACCESS TO RECORDS.** Unless otherwise ordered by the court, the law provides that both parties have access to the records of the child(ren) including school records, activities, teachers and teachers' conferences as well as medical and dental treatment providers and mental health records, unless access is limited by the Court.

**OTHER:** If you believe that there are valid reasons to limit the other party's access to records, you must ask the Court to limit access and obtain an order that does so. (Wyo. Stat. §20-2-201(e)). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. **OTHER TERMS.**

Add any other items regarding the child(ren) you would like to include in your Parenting Plan. Use additional sheets if necessary.

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

Additional sheets of paper are attached.

15. **EXCHANGE OF CHILD(REN):**

Both parents shall have the child(ren) ready on time with sufficient clothing packed and ready at the agreed-upon time of exchange. All clothing that accompanied the child(ren) shall be returned to the other parent, unless the parents otherwise agree.

Unless otherwise stated above, if both parents reside in the same county (or within a reasonable distance of each other), both parents shall share equally in the responsibility of exchanging their child(ren) from one parent to the other.

Other: (provide details for the exchange of the child(ren)):

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16. **FUTURE CONFLICT RESOLUTION.** If the parents cannot reach an agreement in the future on any issue involving the parenting plan, they  agree  do not agree to enter into mediation.

Any costs of mediation (or other alternative dispute resolution) shall be paid \_\_\_\_\_ % by \_\_\_\_\_ (Mother) and \_\_\_\_\_ % by \_\_\_\_\_ (Father). If the mediation fails, the final decision will be made by the Court.

ONCE FILED, The parties may make substantial, permanent modifications to this Parenting Plan only by written agreement signed by both parties, APPROVED BY THE JUDGE and filed with the Court. Minor, non-permanent changes may be made any time IF both parties agree to the changes.

17. **CHILD SUPPORT ISSUES:**

A. **JUDGMENT:** Judgment for past due support, including medical support if applicable, is hereby entered against  Mother or  Father in the amount of \$ \_\_\_\_\_ through \_\_\_\_\_ [Date].

B. **PAYMENT OF JUDGMENT:** Beginning \_\_\_\_\_ [Date],  Mother or  Father shall pay \$ \_\_\_\_\_ per month in addition to current support towards the judgment of \$ \_\_\_\_\_ [total amount of judgment listed in paragraph 8] until the judgment is paid and satisfied in full.

C. **FUTURE CHILD SUPPORT:** Child support shall continue during the minor child's minority, and beyond if the child has a mental, emotional or physical impairment preventing emancipation, or while the child is attending high school or an equivalent program as a full-time student between the ages of 18 and \_\_\_\_\_

D. **TERMINATION OF CHILD SUPPORT:** Child support shall terminate if, during the child's minority, the child marries, is emancipated, becomes self-supporting or dies.

E. **AMOUNT OF CHILD SUPPORT:**  Mother or  Father shall pay \$ \_\_\_\_\_ per month for the current support of the minor child(ren) listed in paragraph 60 beginning \_\_\_\_\_ [Date]. (See "The Steps" section for retroactive modification.) The support obligation shall be paid on the same day of each month thereafter until termination of the support order.



insurance has been obtained or that application for insurability has been made within sixty (60) days of entry of this Order.

C. Proof of insurance coverage shall contain, at a minimum:

- (i) The name of the insurer;
- (ii) The policy number;
- (iii) The address to which all claims should be mailed;
- (iv) A description of any restrictions on usage, such as pre-approval for hospital admission, and the manner in which to obtain pre-approval;
- (v) A description of all deductibles; and
- (vi) Two (2) copies of claim forms.

D. **INSURANCE INFORMATION:** The obligated parent(s) shall provide written notice to the clerk of this court and to the other parent if insurance coverage for any child is denied, revoked, or altered in any way that would affect the other parent (i.e. change to child's coverage, including any change relating to the information required above).

E. **UNCOVERED MEDICAL EXPENSES:** The parties shall pay any non-covered expenses of medical, dental, orthodontic and optical care that is not covered by insurance; the Mother paying \_\_\_\_\_% of uncovered expenses and Father paying \_\_\_\_\_% of uncovered expenses including co-payments and deductibles.

F. **CHANGES TO INSURANCE:** The obligated parent(s) shall provide written notice to the clerk of this court and to the other parent if insurance coverage for any child is denied, revoked or altered in any way that would affect the child's coverage including any change relating to the information required in Paragraph 20.C. in compliance with Wyo. Stat. §20-2-401(c).

19. **ENFORCEMENT:** Either party has the right to petition to enforce an order pursuant to Wyo. Stat. §20-2-310, including asking the court to enforce and require future compliance with an order, by finding the obligated parent to be in contempt of court, award attorney fees, costs and any other relief as the court may deem necessary under the circumstances. Wyoming law (Wyo. Stat. §1-16-102(c)) states that any payment of child support not paid when due shall automatically become a judgment against the parent who is supposed to pay on the due date. Any child support which is not paid within thirty-two (32) calendar days from the date due is subject to an automatic late payment penalty in an amount equal to ten percent (10%) of the amount of the judgment by operation of law.

20. **TAX EXEMPTION:** The parties shall claim as income tax dependency exemptions on federal and state tax returns as follows. A party required to pay child support is only entitled to claim a child(ren) as an income tax dependency exemption if that parent has paid all of the child support due and owing for the year that party is entitled to the exemption:

Name of child	Parent entitled to claim	Year Allowed to Claim
_____	<input type="checkbox"/> mother <input type="checkbox"/> father	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> mother <input type="checkbox"/> father	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> mother <input type="checkbox"/> father	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> mother <input type="checkbox"/> father	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____

21. **CHANGE OF EMPLOYMENT OR ADDRESS:** Each parent shall inform the other parent and the clerk of court in writing of any change of address, phone number, and employment:

A. **CHANGE OF EMPLOYMENT STATUS** - so long as there is a child support obligation, each parent shall notify the other parent and the Clerk of this Court, in writing, on forms available from the Court, within fifteen (15) days of any change in employment, including second jobs, changed employers, starting or ending unemployment compensation, and starting or ending of worker's compensation, or any other change in income.

B. **CHANGE OF ADDRESS** – so long as there is a child support obligation, if either parent plans to change his or her address, that parent must notify the other parent and the clerk of this court, in writing, on forms available from the Clerk of this Court, no later than fifteen (15) days **prior** to the day of the move, the destination of the move and the proposed move date.

C. **CHANGE OF HOME CITY OR STATE OF RESIDENCE** - either parent who plans to change their home city or state of residence, must give written notice thirty (30) days prior to the move, both to the other parent and to the clerk of district court stating the date and destination of the move.

22. **INCOME WITHHOLDING ORDER:** Upon entry or modification of any support order, the court shall also enter an income withholding order which shall take effect immediately, unless the parties agree otherwise, or unless one (1) of the parties demonstrates, and the court finds, that there is good cause not to require immediate income withholding. When the parties agree to an alternative arrangement, the arrangement shall be in writing, signed by the parties and reviewed and entered in the record by the court.

IMMEDIATE ENTRY (**Recommended**); OR

NOT IMMEDIATE ENTRY. If an Income Withholding Order is not immediately effective, one will become effective upon the earliest of the following (1) The date the obligor requests withholding commence; or (2) The date the obligor becomes delinquent in payment of an amount equal to one (1) month's support obligation under the support order.

If there is not to be an immediate Income Withholding Order, the court shall include in the record its findings of good cause, including a statement explaining why implementation of immediate income withholding would not be in the best interests of the child and, in cases involving modification of child support, proof of timely payments: \_\_\_\_\_  
\_\_\_\_\_

23. **REQUIRED INFORMATION:**

The MOTHER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

The FATHER's NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

24. Either party or, when appropriate, the department of family services has the right to petition to enforce an order. **See Wyo. Stat. §20-2-310.**

25. Any provision of the previous support order not specifically addressed or modified herein shall remain in full force and effect.

**SO ORDERED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
DISTRICT COURT JUDGE





STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

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**REDACTED ORDER MODIFYING CUSTODY AND SUPPORT**

---

**THIS MATTER** having come before the Court upon the *Petition for Modification of Custody and Support*; and by: **[check one]**

- Default (and *Entry of Default* has been issued)
- Stipulation/agreement of the parties (Both parties have signed the document)
- Hearing in Court/Trial

The Court hereby **FINDS**:

1. An Order establishing custody and support was entered by the \_\_\_\_\_ Court, \_\_\_\_\_ District, State of \_\_\_\_\_, case/docket number \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ [year].

2. In the Order,  Mother  Father was granted custody of the parties' minor child[ren] and  Mother  Father was ordered to pay \$\_\_\_\_\_ per month in child support and  Mother OR  Father OR  Mother and Father was/were ordered to provide medical insurance coverage.

3. Respondent was served with the *Petition for Modification of Custody and Support*; **[check one]**:

- Personally on the following date \_\_\_\_\_ in the following state: \_\_\_\_\_.
- By publication. (*Copy of Affidavit of Publication must be filed.*)

- Respondent accepted service. (*Acknowledgement and Acceptance of Service* filed with court and Respondent's signature must be notarized.)
- By *Registered or Certified Mail*. (Return receipt must be filed and Clerk must have entered certificate of service.)

4. Respondent filed

- a response/answer
- a counter-petition/counterclaim (if so, did petitioner file a reply to counterclaim?)  yes  no
- no response (default must be entered, unless there is a waiver of right to answer.)
- no response but both parties have signed and agreed to the entry of this Order.

5. A substantial and material change in circumstances exists and it is in the best interest of the child(ren) to modify custody.

6. **CHILDREN AFFECTED BY THIS CASE:**

Initials of Child	Current Address	Year of Birth	Place of Birth State

7. **PRESUMPTIVE CHILD SUPPORT CALCULATION** [See Instructions and Child Support Computation Form]

A. In accordance with Wyo. Stat. §20-2-304, Monthly Presumptive Child Support for \_\_\_\_\_ **[insert number]** child(ren) is as follows:

- 1. Father's net monthly income is: \$ \_\_\_\_\_
- 2. Mother's net monthly income is: \$ \_\_\_\_\_
- 3. Total child support obligation of both parents is: \$ \_\_\_\_\_
- 4. Father's presumptive child support obligation is: \$ \_\_\_\_\_

5. Mother's presumptive child support obligation is: \$ \_\_\_\_\_

**B. CHECK ONE:**

- The child(ren) receive(s) means tested income;  
 The child(ren) DO NOT receive(s) any means tested income.

**8. JUDGMENT OF ARREARS: [Check all the boxes that apply]**

Mother or  Father owes back child support in the amount of \$ \_\_\_\_\_ from \_\_\_\_\_ **[Date of previous support order]** through \_\_\_\_\_ **[Last day of the month before this Order is filed]** for which judgment shall be entered; and/or

Mother and/or  Father owe(s) unpaid medical expenses in the amount of \$ \_\_\_\_\_ from \_\_\_\_\_ **[Date of the order establishing medical support]** through \_\_\_\_\_ **[Last day of the month before this Order is filed]**, for which judgment shall be entered.

**IT IS HEREBY ORDERED THAT:**

**9. CUSTODY, VISITATION AND/OR PARENTING TIME: [Check the boxes that apply]**

**A.  BASIC PARENTING PLAN: (If this plan does not fit your situation, see B. (Other Parenting Plan) below OR G. (Supervised Visitation) below.**

**A.1. Primary residential/physical custody**  Mother **OR**  Father shall have the primary care, custody and control of the parties' minor child(ren).

**A.2. Weekend Parenting Time/Visitation**

The child(ren) shall spend time with  Mother  Father  
 every  every other  other (specify) \_\_\_\_\_ weekend from \_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

**A.3. Weekday Parenting Time/Visitation (If applicable)** The child(ren) shall spend time with  Mother  Father during the week as follows:

Specify days: \_\_\_\_\_

**A.4. Other Parenting Time/Visitation Schedule for Basic Parenting Plan:** (specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B.  **OTHER PARENTING PLAN.**

B.1 **MOTHER:** The child(ren) shall spend time with mother on the following days and times:

WEEKENDS:  every  every other  other (specify) \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

WEEKDAYS: Specify days: \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify time) (specify time)

OTHER: (specify) \_\_\_\_\_

B.2. **FATHER:** The child(ren) shall spend time with father on the following days and times:

WEEKENDS:  every  every other  other (specify) \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

WEEKDAYS: Specify days: \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify time) (specify time)

OTHER: (specify) \_\_\_\_\_

C. **SUMMER SCHEDULE. (Choose one)**

Mother  Father shall have parenting time/visitation with the parties' child(ren) beginning \_\_\_\_\_

and continuing until \_\_\_\_\_

(i.e. Ten days after school lets out from 5:00 p.m. and continuing until ten days prior to school starting up again at 5:00 p.m.)

**AND**

**SUMMER WEEKEND PARENTING TIME/VISITATION (If applicable).**

The child(ren) shall spend time with  Mother  Father  
 every  every other  other (specify) \_\_\_\_\_ weekend from \_\_\_\_\_  
\_\_\_\_\_ to \_\_\_\_\_  
(specify day of week & time) (specify day of week & time)

**AND**

**SUMMER WEEKDAY PARENTING TIME/VISITATION (If applicable) In**

the summer, the child(ren) shall spend time with  Mother  Father during the week as follows:

Specify days: \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_  
(specify time) (specify time and day, if applicable)

**OR**

The schedule during the summer will remain the same as during the school year;

**OR**

The schedule during the summer will remain the same as during the school year, except as follow: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

**OTHER SUMMER PARENTING TIME/VISITATION SCHEDULE**  
(specify) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. HOLIDAY SCHEDULE:** The following holiday schedule will take priority over the regular weekday, weekend, and summer schedules described above. Fill in the boxes below to indicate where the child(ren) will be for the holidays. Provide beginning and ending times. If a holiday is not specified as even, odd, or every year with one parent, then the child(ren) will remain with the parent they are normally scheduled to be with.

**D.1. SPRING VACATION** (The weekday days of school Spring Break).

**CHOOSE ONE**

The child(ren) will alternate spending spring break with each parent, spending it with  Mother  Father in even years and with  Mother  Father in odd years.

The child(ren) will spend part of spring break with each parent (provide details): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other spring break arrangements: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TIME & PLACE OF EXCHANGE** From \_\_\_\_\_ a.m./p.m. the day after school lets out until \_\_\_\_\_ a.m/p.m. the day prior to school beginning after the break.

**OTHER TIME & PLACE OF EXCHANGE:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TRANSPORTATION.**

Mother or  Father shall pick up the child(ren) from \_\_\_\_\_ [insert location] at the beginning of the vacation and  Mother  Father shall pick up the child(ren) at the end of the vacation from \_\_\_\_\_ (location)

**OTHER TRANSPORTATION PLANS** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**D.2. CHRISTMAS (indicate either entire vacation period, half of the vacation period to each parent or other).**

Parent spending time with child(ren)	Odd numbered years	Even numbered years	All Years	Beginning and Ending Time & Place of exchange
<input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	
<input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	<input type="checkbox"/> First Half <input type="checkbox"/> Second Half <input type="checkbox"/> Entire Vacation period	

**TRANSPORTATION**

Mother or  Father shall pick up the child(ren) from \_\_\_\_\_ [insert location] at the beginning of the vacation and  Mother  Father shall pick up the child(ren) at the end of the vacation from \_\_\_\_\_ (location)

**OTHER TRANSPORTATION PLANS** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**D.3. OTHER HOLIDAYS (be very specific about dates or days, times and where exchanges are to going to take place and by whom)**

Event	Name of party spending time with child(ren)	Odd numbered years (X)	Even numbered years (X)	All Years	Time & Place of exchange
<input type="checkbox"/> Mother's Day					
<input type="checkbox"/> Memorial Day					
<input type="checkbox"/> Father's Day					
<input type="checkbox"/> July 4 <sup>th</sup>					
<input type="checkbox"/> Labor Day					
<input type="checkbox"/> Thanksgiving Break					
<input type="checkbox"/> Thanksgiving Day					
<input type="checkbox"/> Winter Break					
<input type="checkbox"/> Child(ren)'s Birthdays					
<input type="checkbox"/> Religious Events					
<input type="checkbox"/> Other Holiday Events					

E. **PRIORITY:** The following priorities shall apply to the parenting/visitation schedule:

When parents are using an alternating weekend plan and the holiday schedule would result in one parent having the child(ren) for three weekends in a row, the alternating weekend pattern will restart so neither parent will go without having the child(ren) for more than two weekends in a row.

If a parent has the child(ren) on a weekend with an unspecified holiday or non-school day attached, they shall have the child(ren) for the holiday or non-school day.

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

F. **TEMPORARY CHANGES TO THE SCHEDULE.**

Any schedule for sharing time with the child(ren) may be changed as long as both parents agree to the changes ahead of time:  in writing;  by speaking to each other (choose one).

Activities scheduled that will affect the other parent's time must be coordinated with the other parent.

**Makeup and Missed Parenting Time:** Only substantial medical reasons will be considered sufficient for postponement of parenting time. If a child is ill and unable to spend time with a parent, a makeup parenting time will be scheduled. If a parent fails to have the child(ren) during their scheduled parenting time for any other reason, there will be no makeup of parenting time unless the parents agree otherwise:  in writing  by speaking to each other (choose one).

G.  **SUPERVISED OR NO VISITATION** (Check and complete only if supervised or no visitation is ordered):

G.1. The  mother  father shall have **no visitation** with the minor child(ren) and this is best for the child(ren) for the following reasons:

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**OR**

G.2. The  mother  father shall have **supervised** visitation with the minor child(ren) for the following reasons:

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Visitation may only take place in the presence of another person as listed below or as otherwise approved by the Court.

Name of Supervisor:

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Visitation shall occur on the following days/times:

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The cost of supervised visitation will be paid by  Mother  Father OR  shared equally.

10. **PERMANENT CHANGES TO THE SCHEDULE.**

Once the judge signs this *Order*, any changes that the parents do not agree on can be made only by applying to the court for a modification. One parent cannot change a court-ordered Parenting Plan or Visitation Schedule on their own.

11. **PARENT-CHILD COMMUNICATION.**

Both parents and child(ren) shall have the right to communicate by telephone, in writing or by e-mailing during reasonable hours without interference or monitoring by the other parent.

Procedures for telephone, written, or e-mail access (describe ground rules for parent-child communication): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

12. **MUTUAL RESPECT.** Parents will not say things or knowingly allow others to say things in the presence of their child(ren) that would take away the child(ren)'s love and respect for the other parent.

13. **ACCESS TO RECORDS.** Unless otherwise ordered by the court, the law provides that both parties have access to the records of the child(ren) including school records, activities, teachers and teachers' conferences as well as medical and dental treatment providers and mental health records, unless access is limited by the Court.

**OTHER:** If you believe that there are valid reasons to limit the other party's access to records, you must ask the Court to limit access and obtain an order that does so. (Wyo. Stat. §20-2-201(e)). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. **OTHER TERMS**

Add any other items regarding the child(ren) you would like to include in your Parenting Plan. Use additional sheets if necessary.

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

Additional sheets of paper are attached.

15. **EXCHANGE OF CHILD(REN):**

Both parents shall have the child(ren) ready on time with sufficient clothing packed and ready at the agreed-upon time of exchange. All clothing that accompanied the child(ren) shall be returned to the other parent, unless the parents otherwise agree.

Unless otherwise stated above, if both parents reside in the same county (or within a reasonable distance of each other), both parents shall share equally in the responsibility of exchanging their child(ren) from one parent to the other.

Other: (provide details for the exchange of the child(ren)):

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16. **FUTURE CONFLICT RESOLUTION.** If the parents cannot reach an agreement in the future on any issue involving the parenting plan, they  agree  do not agree to enter into mediation.

Any costs of mediation (or other alternative dispute resolution) shall be paid \_\_\_\_\_ % by \_\_\_\_\_ (Mother) and \_\_\_\_\_ % by \_\_\_\_\_ (Father). If the mediation fails, the final decision will be made by the Court.

ONCE FILED, The parties may make substantial, permanent modifications to this Parenting Plan only by written agreement signed by both parties, APPROVED BY THE JUDGE and filed with the Court. Minor, non-permanent changes may be made any time IF both parties agree to the changes.

17. **CHILD SUPPORT ISSUES:**

A. **JUDGMENT:** Judgment for past due support, including medical support if applicable, is hereby entered against  Mother or  Father in the amount of \$ \_\_\_\_\_ through \_\_\_\_\_ [Date].

B. **PAYMENT OF JUDGMENT:** Beginning \_\_\_\_\_ [Date],  Mother or  Father shall pay \$ \_\_\_\_\_ per month in addition to current support towards the judgment of \$ \_\_\_\_\_ [total amount of judgment listed in paragraph 8] until the judgment is paid and satisfied in full.

C. **FUTURE CHILD SUPPORT:** Child support shall continue during the minor child's minority, and beyond if the child has a mental, emotional or physical impairment preventing emancipation, or while the child is attending high school or an equivalent program as a full-time student between the ages of 18 and

D. **TERMINATION OF CHILD SUPPORT:** Child support shall terminate if, during the child's minority, the child marries, is emancipated, becomes self-supporting or dies.

E. **AMOUNT OF CHILD SUPPORT:**  Mother or  Father shall pay \$ \_\_\_\_\_ per month for the current support of the minor child(ren) listed in paragraph 60 beginning \_\_\_\_\_ [Date]. (See "The Steps" section for retroactive modification.) The support obligation shall be paid on the same day of each month thereafter until termination of the support order.



insurance has been obtained or that application for insurability has been made within sixty (60) days of entry of this Order.

C. Proof of insurance coverage shall contain, at a minimum:

- (i) The name of the insurer;
- (ii) The policy number;
- (iii) The address to which all claims should be mailed;
- (iv) A description of any restrictions on usage, such as pre-approval for hospital admission, and the manner in which to obtain pre-approval;
- (v) A description of all deductibles; and
- (vi) Two (2) copies of claim forms.

D. **INSURANCE INFORMATION:** The obligated parent(s) shall provide written notice to the clerk of this court and to the other parent if insurance coverage for any child is denied, revoked, or altered in any way that would affect the other parent (i.e. change to child's coverage, including any change relating to the information required above).

E. **UNCOVERED MEDICAL EXPENSES:** The parties shall pay any non-covered expenses of medical, dental, orthodontic and optical care that is not covered by insurance; the Mother paying \_\_\_\_\_% of uncovered expenses and Father paying \_\_\_\_\_% of uncovered expenses including co-payments and deductibles.

F. **CHANGES TO INSURANCE:** The obligated parent(s) shall provide written notice to the clerk of this court and to the other parent if insurance coverage for any child is denied, revoked or altered in any way that would affect the child's coverage including any change relating to the information required in Paragraph 20.C. in compliance with Wyo. Stat. §20-2-401(c).

19. **ENFORCEMENT:** Either party has the right to petition to enforce an order pursuant to Wyo. Stat. §20-2-310, including asking the court to enforce and require future compliance with an order, by finding the obligated parent to be in contempt of court, award attorney fees, costs and any other relief as the court may deem necessary under the circumstances. Wyoming law (Wyo. Stat. §1-16-102(c)) states that any payment of child support not paid when due shall automatically become a judgment against the parent who is supposed to pay on the due date. Any child support which is not paid within thirty-two (32) calendar days from the date due is subject to an automatic late payment penalty in an amount equal to ten percent (10%) of the amount of the judgment by operation of law.

20. **TAX EXEMPTION:** The parties shall claim as income tax dependency exemptions on federal and state tax returns as follows. A party required to pay child support is only entitled to claim a child(ren) as an income tax dependency exemption if that parent has paid all of the child support due and owing for the year that party is entitled to the exemption:

Initials of child _____	Parent entitled to claim <input type="checkbox"/> mother <input type="checkbox"/> father	Year Allowed to Claim <input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> mother <input type="checkbox"/> father	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> mother <input type="checkbox"/> father	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> mother <input type="checkbox"/> father	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____

21. **CHANGE OF EMPLOYMENT OR ADDRESS:** Each parent shall inform the other parent and the clerk of court in writing of any change of address, phone number, and employment:

A. **CHANGE OF EMPLOYMENT STATUS** - so long as there is a child support obligation, each parent shall notify the other parent and the Clerk of this Court, in writing, on forms available from the Court, within fifteen (15) days of any change in employment, including second jobs, changed employers, starting or ending unemployment compensation, and starting or ending of worker's compensation, or any other change in income.

B. **CHANGE OF ADDRESS** – so long as there is a child support obligation, if either parent plans to change his or her address, that parent must notify the other parent and the clerk of this court, in writing, on forms available from the Clerk of this Court, no later than fifteen (15) days **prior** to the day of the move, the destination of the move and the proposed move date.

C. **CHANGE OF HOME CITY OR STATE OF RESIDENCE** - either parent who plans to change their home city or state of residence, must give written notice thirty (30) days prior to the move, both to the other parent and to the clerk of district court stating the date and destination of the move.

22. **INCOME WITHHOLDING ORDER:** Upon entry or modification of any support order, the court shall also enter an income withholding order which shall take effect immediately, unless the parties agree otherwise, or unless one (1) of the parties demonstrates, and the court finds, that there is good cause not to require immediate income withholding. When the parties agree to an alternative arrangement, the arrangement shall be in writing, signed by the parties and reviewed and entered in the record by the court.

IMMEDIATE ENTRY (**Recommended**); OR

NOT IMMEDIATE ENTRY. If an Income Withholding Order is not immediately effective, one will become effective upon the earliest of the following (1) The date the obligor requests withholding commence; or (2) The date the obligor becomes delinquent in payment of an amount equal to one (1) month's support obligation under the support order.

If there is not to be an immediate Income Withholding Order, the court shall include in the record its findings of good cause, including a statement explaining why implementation of immediate income withholding would not be in the best interests of the child and, in cases involving modification of child support, proof of timely payments: \_\_\_\_\_  
\_\_\_\_\_

23. **REQUIRED INFORMATION:**

The MOTHER'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

YEAR OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

The FATHER's NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

YEAR OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

EMPLOYER'S NAME \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

24. Either party or, when appropriate, the department of family services has the right to petition to enforce an order. **See Wyo. Stat. §20-2-310.**

25. Any provision of the previous support order not specifically addressed or modified herein shall remain in full force and effect.

**SO ORDERED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
DISTRICT COURT JUDGE





STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_.)  
(Print name of other party)

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### CONFIDENTIAL INFORMATION FORM

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This form and the attached documents are confidential pursuant to the Wyoming Rules Governing Access to Court Records and Redactions From Court Records and are to be sealed when filed:

Attach copy of ***Order Modifying Custody and Support*** that includes dates of birth of the Petitioner and Respondent and names and dates of birth of the child(ren).

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

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Filed by:

\_\_\_\_\_  
Signature

Printed Name: \_\_\_\_\_

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

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

**CONFIDENTIAL**

Respondent: \_\_\_\_\_.)  
(Print name of other party)

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### CONFIDENTIAL STATEMENT FOR CHILD SUPPORT ORDER

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The following information shall remain confidential and subject to inspection by persons other than the parties, their attorneys or the department of family services to the extent necessary to enforce the Child Support Enforcement Act and the Uniform Interstate Family Support Act **only by court order** and contains the:

1. The name and social security number of each parent:

Name of Petitioner: \_\_\_\_\_

Petitioner's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of Respondent: \_\_\_\_\_

Respondent's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

2. The name and social security number of the child or children for whom child support has been ordered:

Child's Name: \_\_\_\_\_

Child's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Child's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Child's Social Security Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Child's Social Security Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**IN WITNESS WHEREOF**, we have hereunto set our hands the day and year first above written.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_ )  
(Print name of other party)

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### INCOME WITHHOLDING ORDER

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**THE COURT ORDERS** any payor of the \_\_\_\_\_  
(name of Obligor, person owing child support), to pay child support to  
\_\_\_\_\_ (name of Obligee, person owed child support) commencing on  
\_\_\_\_\_ (date). Payments are due on the \_\_\_\_\_ day of every  
\_\_\_\_\_ (specify time period, i.e. monthly). Total arrears (past due support) owed as  
of \_\_\_\_\_ (date) for child support is \$\_\_\_\_\_.

The Court orders the immediate activation of an *Income Withholding Order* against the obligor, pursuant to Wyo. Stat. § 20-6-204.

Income withheld must be paid through the Clerk of the District Court or the State Child Support Disbursement Unit at the following address for forwarding to the obligee: \_\_\_\_\_

**OR**

Pursuant to Wyo. Stat. § 20-6-204, this *Income Withholding Order* is not subject to immediate activation because either:

Both parties have agreed in writing to an alternative arrangement. (When the parties agree to an alternative arrangement, the arrangement shall be in writing, signed by the parties and reviewed and entered in the record by the court.)

**OR**

The Court finds there is good cause not to require the immediate activation of an *Income Withholding Order* because: (The court shall include in the record its findings of good cause, including a statement explaining why implementation of immediate income withholding would not be in the best interests of the child and, in cases involving modification of child support, proof of timely payments.)

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Any income withholding order not subject to immediate activation shall become effective upon the date the obligor requests withholding commence; or the date the obligor becomes delinquent in payment of an amount equal to one (1) month's support obligation under the support order as set forth in Wyo. Stat. § 20-6-205.

**IT IS FURTHER ORDERED** that upon receipt of a *Notice to Payor* from the Clerk of District Court, every employer or other person now or in the future owing income to the obligor shall comply with all terms of the notice and shall withhold a portion of the obligor's income and remit it to the Clerk of District Court or as otherwise noted in accordance with the terms of the notice.

For purposes of this order: "INCOME" means any form of periodic payment or return in money to an individual, regardless of source. Income includes, but is not limited to wages, earnings, salary, commission, compensation as an independent contractor, temporary total disability and permanent partial disability, worker's compensation payments, unemployment compensation, disability, annuity and retirement benefits, and any other payment made by any payor.

Furthermore, no employer may discharge, discipline, refuse employment to, or otherwise penalize an obligor because of this *Income Withholding Order*.

**IT IS FURTHER ORDERED** that the payor comply with all the terms of the *Notice to Payor* and all subsequent notices from the Clerk served upon the payor;

The last known addresses of the obligor and obligee are as follows\*:

Obligor (person owing child support): \_\_\_\_\_

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

\_\_\_\_\_

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\* The parties' social security numbers are included in a separate *Confidential Statement of the Parties*.  
*Income Withholding Order*  
Revised February 2011  
Page 2 of 3

Obligee (person to receive child support): \_\_\_\_\_

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

\_\_\_\_\_

**IT IS, FURTHER, ORDERED** that each party shall notify the Clerk of District Court, in writing, on forms available from the Clerk, within fifteen (15) days of any changes in address or employment status.

At the time an *Income Withholding Order* is entered, the Clerk shall mail a copy of the income withholding order and the support order to the last known address of the obligor and the obligee.<sup>†</sup>

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

BY THE COURT:

\_\_\_\_\_  
District Court Judge

Copies sent to:

Petitioner's name and address: \_\_\_\_\_

Respondent's name and address: \_\_\_\_\_

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<sup>†</sup> Include addressed and stamped envelopes for copies when filing Income Withholding Order with the clerk.

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

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### NOTICE TO PAYOR

Original  Amended  Termination

TO: [Employer's/Withholder's Name/Address] \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. You shall remit all sums withheld from the obligor's income to the clerk of district court or the State Disbursement Unit as set forth in paragraph 3 of this *Notice to Payor*. By law, you are required to deduct these amounts from the above-named employee's/obligor's income, until further notice, even if the Order/Notice is not issued by your State.

2. **Withholding Amount:** The total amount to be withheld from the obligor's income is calculated as follows:

\$ \_\_\_\_\_ Per \_\_\_\_\_ Current child support  
\$ \_\_\_\_\_ Per \_\_\_\_\_ Past due child support  
Arrears greater than 12 weeks?  yes  no  
\$ \_\_\_\_\_ Per \_\_\_\_\_ Current cash medical support  
\$ \_\_\_\_\_ Per \_\_\_\_\_ Past-due cash medical support  
\$ \_\_\_\_\_ Per \_\_\_\_\_ Spousal support  
\$ \_\_\_\_\_ Per \_\_\_\_\_ Past-due spousal support  
\$ \_\_\_\_\_ Per \_\_\_\_\_ Other (specify) \_\_\_\_\_

**Total Amount Due** Upon receipt of certified copies of the notice to payor and the income withholding order, the payor shall deduct and pay over a total of \$ \_\_\_\_\_  per month  weekly  bi-weekly  semi-monthly to be withheld from the obligor's income starting the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, and continuing until further order of the Court.

3. **REMITTANCE INFORMATION:** When remitting payment, provide the case identifier, the name and social security number of the obligor and the date the income was withheld. If the employee's/obligor's principal place of employment is Wyoming, you must begin withholding no later than the first pay period that occurs following service on the payor of this Order/Notice.

Send payment **within 7 working days** of the pay date/date of withholding. You do not have to vary your pay cycle to be in compliance with the support order.

A. The payor shall remit the amount withheld to the clerk of district court, whose address is: \_\_\_\_\_

\_\_\_\_\_ within **seven (7) days** after the date the obligor is paid, or (if checked)

The State Disbursement Unit, Wyoming Child Support Enforcement, PO Box 1027, Cheyenne, WY 82003.

If the employee's/obligor's principal place of employment is not Wyoming, for limitations on withholding, applicable time requirements, and any allowable employer fees, follow the laws and procedures of the employee's/obligor's principal place of employment.

4. **Priority:** The withholding under this order has priority over any other legal process under state law (or tribal law, if applicable) against the same income. Federal tax levies in effect before receipt of this order have priority. If Federal tax levies are in effect, please contact the State Child Support Enforcement Agency.

5. **Combined Payments:** You may combine withheld amounts from more than one employee's/obligor's income in a single payment to each agency/party requesting withholding. You must, however, separately identify the portion of the single payment that is attributable to each employee/obligor.

6. **Reporting the Pay Date/Date of Withholding:** You must report the pay date/date of withholding when sending the payment. The pay date/date of withholding is the date on which the amount was withheld from the employee's wages. You must comply with the law of the state of the employee's/obligor's principal place of employment with respect to the time periods within which you must implement the withholding and forward the support payments.

7. **Employee/Obligor with Multiple Support Withholdings:** If there is more than one Order or Notice against this employee/obligor and you are unable to honor all support Orders or Notices due to federal, state, or tribal withholding limits, you must follow the state or tribal law/procedure of the employee's/obligor's principal place of employment. You must honor all Orders or Notices to the greatest extent possible. (See **Withholding Limits** below.)

8. **Termination Notification:** Within thirty (30) days after the employee's/obligor's employment terminates or the employee/obligor ceases to receive income from the payor the payor shall give written notice to the clerk of district court. The notice shall include the following information:

**THE EMPLOYEE/OBLIGOR NO LONGER WORKS FOR:** \_\_\_\_\_  
**EMPLOYEE'S/OBLIGOR'S NAME:** \_\_\_\_\_  
**CASE IDENTIFIER:** \_\_\_\_\_  
**DATE OF SEPARATION FROM EMPLOYMENT:** \_\_\_\_\_  
**LAST KNOWN HOME ADDRESS:** \_\_\_\_\_

**NEW EMPLOYER/ADDRESS:** \_\_\_\_\_

9. **Continuing Duty:** For a period of one (1) year from the date the employee's/obligor's employment terminates with the payor, the payor shall, upon request, disclose to the Clerk of this Court, the following information:

- A. Any new address for the obligor of which the payor may become aware; and
- B. The name and address of the obligor's new employer, if known to the payor.

10. **Worker's Compensation and Unemployment:** In the case of worker's compensation or unemployment compensation benefits, nothing in W. S. 20-6-202(a)(i) or (xv) shall require a payor to withhold an amount for any type of support or arrearages not authorized to be withheld from those benefits by federal law or regulations.

11. **Change in Insurance Coverage:** If insurance coverage of the obligor's children is provided by or through the payor, the payor shall notify the clerk within thirty (30) days of any lapse or material change in that coverage.

12. The payor shall not be liable to the obligor for any payment or disclosure made as authorized by this act.

13. **Lump Sum Payments:** You may be required to report and withhold from lump sum payments such as bonuses, commissions, or severance pay. If you have any questions about lump sum payments, contact the Child Support Enforcement (IV-D) Agency.

14. **Withholding Limits:** The amount actually withheld for support combined with the fee authorized by W.S. 20-6-212(c) (five dollars (\$5.00) for each payment made pursuant to the income withholding order) shall not exceed the maximum amount authorized by 15 U.S.C. §1673.\*

For state orders, you may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (15 U.S.C. § 1673(b)); or 2) the amounts allowed by the state of the employee's/obligor's principal place of employment. The federal limit applies to the aggregate disposable weekly earnings (ADWE). ADWE is the net income left after making mandatory deductions such as: state, federal, local taxes, Social Security taxes, statutory pension contributions, and Medicare taxes. The payor shall deduct the maximum amount required by this notice, unless otherwise ordered by the court, for each pay period.

\* The Federal CCPA limit is 50% of the ADWE for child support and alimony, which is increased by 1) 10% if the employee does not support a second family; and/or 2) 5% if arrears greater than 12 weeks.

For tribal orders, you may not withhold more than the amounts allowed under the law of the issuing tribe. For tribal employers who receive a state order, you may not withhold more than the amounts allowed under the law of the state that issued the order.

CHILD(REN)'S INITIALS:

YEAR OF BIRTH:

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

15. **Statutory Fee:** As authorized by Wyo. Stat. § 20-6-212(c), in addition to the amount withheld from the obligor's income, the payor may, subject to limitations of disposable income under W. S. §§ 20-6-210(b)(iii) and 27-3-319(c), deduct and retain from the obligor's remaining income \$5.00 for each payment made pursuant to the *Income Withholding Order*.

16. **Sanctions:** The payor is notified that payor is subject to the sanctions of Wyo. Stat. § 20-6-218, including the following:

A. **Liability:** Any payor who fails to withhold income in the amount specified in the *Notice to Payor* is liable for any amount up to the accumulated amount the payor should have withheld from the obligor's income and remitted to the clerk of this court.

B. **Anti-discrimination:** You are subject to a fine determined under State law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against any employee/obligor because of a child support withholding. The penalties imposed under Wyo. Stat. § 20-6-218 shall be collected from the violator and distributed by the court to the county public school fund. Before the court imposes a civil penalty, the payor accused of a violation shall be notified, in writing, of the specific nature of the alleged violation and the time and place, at least ten (10) days from the date of the notice, when a hearing of the matter shall be held. After hearing or upon failure of the accused to appear at the hearing, the court shall determine the amount of the civil penalty to be imposed in accordance with the limitation in Wyo. Stat. § 20-6-218.

C. Any payor who violates the provisions set forth in Wyo. Stat. § 20-6-202 et seq. is subject to a civil penalty in an amount of not more than two hundred dollars (\$200.00).

D. Penalties under Wyoming statutes shall not be imposed unless service of the notice to payor was completed by sending by certified mail return receipt requested to, or by personal service upon, the employer.

E. Except for a violation of subsection (B) of this section, an employer who complies in good faith with an income withholding order shall not be subject to civil liabilities.

F. If you have any doubts about the validity of the Order or Notice, contact the Child Support Enforcement Agency or Clerk of District Court.

17. **Duration:** The *Income Withholding Order* is binding upon the payor until further notice is received as provided in accordance with W.S. 20-6-210(a).

18. This *Notice to Payor* shall be prepared and filed with the Clerk before an *Income Withholding Order* is mailed to the payor.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

CLERK OF DISTRICT COURT

By: \_\_\_\_\_  
Deputy

**CERTIFICATE OF MAILING**

The undersigned certifies that a copy of the *Notice to Payor* and a copy of the *Income Withholding Order* were mailed the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by  First-class U.S. mail, postage prepaid, or  certified mail return receipt requested to the last known address of the payor (employer of the parent obligated to pay child support) and the obligor (parent owing support) as follows:

Employer/Payor's Address:

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

Employee/Obligor's Address:

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

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

---

**MOTION FOR \_\_\_\_\_**  
(describe what you are requesting from the Court)

---

I am the  Petitioner  Respondent in this action. I am requesting that:

(PLEASE PRINT CLEARLY.)

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My reasons are:

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**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name other party)

Civil Action Case No. \_\_\_\_\_

---

**RESPONSE TO MOTION FOR \_\_\_\_\_**  
(insert in name of motion)

---

I am the  Petitioner  Respondent in this action. I am requesting that:

(PLEASE PRINT CLEARLY.)

---

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My reasons are:

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**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

---

**ORDER ON MOTION FOR \_\_\_\_\_**  
(insert name of motion)

---

THIS MATTER, having come before the court on  Petitioner's   
Respondent's Motion for \_\_\_\_\_; and the court having considered the  
same and being otherwise fully advised, hereby FINDS AS FOLLOWS: \_\_\_\_\_

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IT IS THEREFORE ORDERED:

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THE MOTION IS  Denied  Granted  Other \_\_\_\_\_

**SO ORDERED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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DISTRICT COURT JUDGE

Copies sent to:

Petitioner's name and address: \_\_\_\_\_

Respondent's name and address: \_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_  
JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

---

### REQUEST FOR SETTING

---

The  Petitioner  Respondent, \_\_\_\_\_ (name) requests a time and date for a hearing/trial in the District Court. The hearing/trial will take approximately \_\_\_\_\_  hours/ \_\_\_\_\_  minutes and will address the following issues:

1.  Child Custody/Support Modification (NOTE: If request is for a full trial, also submit the *Order Setting Trial and Requiring Pretrial Statements*)
2.  Child Support Modification (NOTE: If request is for a full trial, also submit the *Order Setting Trial and Requiring Pretrial Statements*)
3. a.  The parties have both signed the *Order Modifying Child Custody and/or Support*  
**OR**  
b.  The parties are not able to agree on all of the terms of the divorce, including:
  - Allocation of parental responsibilities/custody
  - Child support
  - Motion for \_\_\_\_\_
  - Other: \_\_\_\_\_
4. Is a court reporter needed\*:  Yes  No.

---

\* Rule 905 of the Uniform Rules of District Courts of Wyoming sets forth the fee for court reporting. In all civil cases an appearance fee of \$45.00 shall be paid for each day, or any portion thereof, that evidence and testimony is received. This fee covers the reporting of all testimony or admissions made by either side, objections to the introduction of testimony, the ruling of the court thereon and the exceptions taken thereto. The fee also covers the reporting of motions made within the trial proceeding, the hearing on objections to jury instructions and the reporting of the verdict. This fee does not cover special services such as voir dire, motion hearings outside of a trial proceeding nor opening and closing statements.

Any party requesting the reporting of a particular matter by the official court reporter shall provide notice to the official court reporter at least five (5) working days before the matter is set for hearing. The five-day notice requirement will not be waived by the Court. The notice is required for all civil matters including jury trials. Payment of the statutory reporting fee of \$45.00 per day shall be paid to the official court reporter prior to the commencement of the hearing/trial. Checks for the statutory reporting fee shall be made payable to the Wyoming State Treasurer. Rule 904 Uniform Rules of the District Courts of the State of Wyoming.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature  
\_\_\_\_\_  
Print name

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_ )  
(Print name of other party) .)

Civil Action Case No. \_\_\_\_\_

---

**ORDER SETTING MODIFICATION TRIAL  
AND REQUIRING PRETRIAL STATEMENTS**

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**THIS MATTER** having come before the Court upon a *Request for Setting*, and the Court being generally advised in the premises;

**IT IS HEREBY ORDERED** that a trial of the above matter is hereby scheduled for Courtroom No. \_\_\_\_ of the \_\_\_\_\_ County Courthouse, \_\_\_\_\_, Wyoming on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_ commencing at \_\_:\_\_\_\_ o'clock \_\_.M.

(\_\_\_\_) minutes/hour(s)/day(s) has been set aside for the trial of this matter.

**IT IS FURTHER ORDERED** that each party shall file and serve on the opposing party or their attorney, if represented, no later than five (5) days prior to the trial, the party's sworn statement setting forth the facts, to the best of the party's knowledge and belief, called for by Section "A" of the attached list of information, and a statement by counsel (attorney), if any, of the client's position and proof as called for by Section "B." These filings are required to narrow and simplify the issues, prevent surprise and to eliminate unnecessary proof. The material may be presented in narrative form but must be complete for purposes called for by this order. To avoid duplication, the parties or their attorneys, if any, may submit a joint statement of those items not in dispute.

**Any party requesting the reporting of a particular matter by the official court reporter shall provide notice to the official court reporter at least five (5) working days before the matter is set for hearing. The five-day notice requirement will not be waived by the Court.**

**The notice is required for all civil matters including jury trials. Payment of the statutory reporting fee of \$45.00 per day shall be paid to the official court reporter prior to the commencement of the hearing/trial. Checks for the statutory reporting fee shall be made payable to the Wyoming State Treasurer.** Rule 904 Uniform Rules of the District Courts of the State of Wyoming.

In the event that this case settles, the parties are informed that there will be no change in the scheduling of this matter by the Court until such time as the settlement is reduced to writing and a written agreement is presented to the court. There will be no continuances or canceling of the trial date based on telephone calls.

**DATED** this \_\_\_\_\_ day of \_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
DISTRICT COURT JUDGE

Copies to:

Petitioner's name and address: \_\_\_\_\_

Respondent's name and address: \_\_\_\_\_

SECTION "A"  
SWORN STATEMENT OF PARTY

Items to be included:

1. Personal data and history relevant to the issues, including name, age, prior marriages, if any, children's initials, present living situation of the parties and their immediate family. For instance, where each party and the children are residing, with whom the children are residing, and how the children are being cared for during the day. This item calls for a brief but comprehensive statement of the party's personal history as it may relate to the divorce litigation.
2. Present employment, including identity and location of employer, nature of the job, length of employment, gross and net income and benefits, including health and accident coverage, if any, its convertibility to non-group plan in event of loss of employment, terms of retirement program, all deductions from salary or wages, and prospects for the continuation of the employment.
3. Employment history and employability, including previous employment and incomes, education, training and work experience affecting employability. Include any other factors substantially affecting employability.
4. Other income, whatever the source.
5. Any other information which counsel, or the party, believe to be material to the determination of the issues.

SECTION "B"  
STATEMENT OF COUNSEL

Statement of the case by counsel of the client's position with respect to:

1. Amount of child support:
  - a. Amount called for by the child support guidelines;
  - b. Why, if it is urged, there should be departure from the guidelines.
2. Reasons, either in favor of or against modification of child custody and/or child support.
3. List of witnesses and specific summary of expected testimony.
4. Exhibits.

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

**CONFIDENTIAL**

Respondent: \_\_\_\_\_ )  
(Print name of other party) )

---

**AFFIDAVIT OF INDIGENCY AND REQUEST FOR WAIVER  
OF FILING FEES AND ALL FEES ASSOCIATED THEREWITH**

---

The applicant is entitled to and requests the court provide access to this State's judicial processes without payment of court fees, pursuant to *Boddie v. Connecticut*, 401 U.S. 371 (1971) (recognizing that in divorce proceedings, States must provide access to the courts without regard to a party's ability to pay court fees). Furthermore, pursuant to Wyo. Stat. §18-6-608, the court may waive the Sheriff's service fees upon an adequate showing of indigency.

**THE UNDERSIGNED REQUESTS THE COURT TO WAIVE FILING FEES IN THE ABOVE MATTER. THE UNDERSIGNED FURTHER ADVISES THAT INFORMATION CONTAINED IN THIS AFFIDAVIT IS THE TRUTH, THE WHOLE TRUTH, AND NOTHING BUT THE TRUTH. I FURTHER AUTHORIZE THE COURT TO VERIFY ALL OR ANY PORTION OF THE FOLLOWING INFORMATION:**

**I. PERSONAL/LIVING ARRANGEMENTS/ RESIDENCE**

1. My name is: \_\_\_\_\_  
I am the  Petitioner/  Respondent in the above matter.

2. Year of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

3. Marital Status:  Married  Separated  Unmarried (single, divorced or widowed)

4. My spouse's name is: \_\_\_\_\_

5. I currently reside at: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ How Long? \_\_\_\_\_  
(Physical Address) (City) (State) (Zip) (Yrs-Mos)

(a) If mailing address is different, please complete: \_\_\_\_\_

- (b) I live with:  spouse  friend  roommate  parents
6. My Home Number is: (\_\_\_\_\_) \_\_\_\_\_ My Work Number is: (\_\_\_\_\_) \_\_\_\_\_  
 (a) I may be reached during the day at: (\_\_\_\_\_) \_\_\_\_\_  
 (b) You can leave a message for me at: (\_\_\_\_\_) \_\_\_\_\_  
 (c) My cell phone number is: (\_\_\_\_\_) \_\_\_\_\_

7. I own my home:  YES or  NO

If **you own** your home, then answer:

- (a) I owe \$ \_\_\_\_\_ on the mortgage.  
 (b) The monthly mortgage payment is: \$ \_\_\_\_\_  
 (c) The house I own could be sold for \$ \_\_\_\_\_  
 (d) I pay lot rent of \$ \_\_\_\_\_/mo.

If you **do not** own your home, then answer:

- (e) I live with: \_\_\_\_\_  
 (f) I pay \$ \_\_\_\_\_/mo. rent.  
 (g) I gave the landlord a damage deposit of \$ \_\_\_\_\_  
 (h) I pay lot rent of \$ \_\_\_\_\_/mo.

8. Previous Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
 (Street Address) (City) (State) (Zip)

9. How long at previous address? \_\_\_\_\_ (Yrs/Mos)

**II. OCCUPATION/EMPLOYMENT/INCOME SOURCES:**

10. My occupation/trade is: \_\_\_\_\_  
 (a) I am employed by: \_\_\_\_\_  
 (b) My monthly GROSS income (before deductions, tax, etc.) is: \$ \_\_\_\_\_  
 (c) My monthly NET income (after deductions) is: \$ \_\_\_\_\_  
 (d) I am unemployed, the last time I worked was: \_\_\_\_\_  
 (e) My last place of employment was: \_\_\_\_\_  
 (f) If currently unemployed, please disclose the amount of your last paycheck: \$ \_\_\_\_\_  
 (g) I have the following OTHER sources of income:
- |                          |                    |          |                          |
|--------------------------|--------------------|----------|--------------------------|
| <input type="checkbox"/> | Social Security    | \$ _____ |                          |
| <input type="checkbox"/> | Workers' Comp.     | \$ _____ |                          |
| <input type="checkbox"/> | TANF Benefits      | \$ _____ |                          |
| <input type="checkbox"/> | Veteran's Benefits | \$ _____ |                          |
| <input type="checkbox"/> | Welfare            | \$ _____ |                          |
| <input type="checkbox"/> | Child Support      | \$ _____ |                          |
| <input type="checkbox"/> | Unemployment       | \$ _____ | Wks/Mos Remaining: _____ |
| <input type="checkbox"/> | Other              | \$ _____ |                          |

**III. ASSETS:**

11. I have the following cash, or other liquid assets, on hand: \$ \_\_\_\_\_

12. I and my spouse (if married) have the following savings and/or checking accounts:

NAME OF BANK	LAST 4 DIGITS OF ACCOUNT NO.	CURRENT BALANCE

13. I own the following vehicles, recreational vehicles, ATV's, motorcycles, tractors, boats, jet skis, etc:

YEAR	MAKE / MODEL	APPROX. VALUE

14. (a) My friends or family can give or loan me \$\_\_\_\_\_ for the expenses of this action.  
 (b) I can borrow \$\_\_\_\_\_ for the expenses of this action.  
 (c) I own other real estate (other than primary residence) worth approximately \$\_\_\_\_\_.  
 (d) I  do  do not expect to receive a \$\_\_\_\_\_ tax refund on \_\_\_\_\_.  
 (e) I am owed accounts receivable worth about \$\_\_\_\_\_.  
 (f) I own machinery or equipment worth approximately \$\_\_\_\_\_.  
 (g) Estimated value of household furniture and appliances is \$\_\_\_\_\_.  
 (h) I own clothing and jewelry worth approximately \$\_\_\_\_\_.  
 (i) I own guns worth approximately \$\_\_\_\_\_.  
 (j) I own tools worth about \$\_\_\_\_\_.

**IV. DEBTS/OBLIGATIONS:**

15. I, or my spouse, (if married) have the following credit cards:

CREDIT CARD/LAST 4 DIGITS OF ACCOUNT #	MONTHLY PMT.	AMOUNT OWING	CREDIT LINE

16. I have the following monthly payments (including utilities, i.e. telephone, cable, etc.):

PAYABLE TO	MONTHLY EST. PMTS.	BALANCE OWING

17. I have remaining debt, as follows: (include to whom and the amount owed)

PAYABLE TO/ADDRESS/PHONE NUMBER	MONTHLY PMTS.	BALANCE OWING


**V. OTHER:**

18. The dependents I claim on my annual income tax returns are:

NAME (INITIALS ONLY)	RELATIONSHIP	NAME	RELATIONSHIP
1)		4)	
2)		5)	
3)		6)	

19. I have read, am familiar with, and understand the following law of the State of Wyoming:

**“A person commits a felony punishable by imprisonment for not more than two (2) years, a fine of not more than two thousand dollars (\$2,000), or both, if, while under a lawfully administered oath or affirmation in a matter where an oath is authorized by law, he knowingly makes a false certificate, affidavit, acknowledgment, declaration or statement other than in a judicial or administrative proceeding.” Wyoming Statute § 6-5-303.**

\_\_\_\_\_  
 Signature  
 Printed Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

STATE OF WYOMING        )  
   )  
 COUNTY OF \_\_\_\_\_  )

Subscribed and sworn to before me by \_\_\_\_\_ this \_\_\_\_\_ day  
 of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Notary Public / Court Clerk

My Commission Expires: \_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT

\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )

Civil Action Case No. \_\_\_\_\_

vs. )

Respondent: \_\_\_\_\_, )  
(Print name of other party) )

---

**ORDER ON REQUEST FOR WAIVER OF FILING FEES AND ALL FEES  
ASSOCIATED THEREWITH**

---

This matter has come before the Court on the *Affidavit of Indigency and Request for Waiver of Filing Fees and All Fees Associated Therewith*. The Court having reviewed the Affidavit, the Court hereby finds and orders as follows:

1.  The request for waiver of filing fees and all fees associated therewith, including service of process fees, is granted.
2.  The request for waiver of filing fees and all fees associated therewith is denied.

DONE this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
District Court Judge

Copies sent to:

Petitioner's name and address: \_\_\_\_\_

Respondent's name and address: \_\_\_\_\_

STATE OF WYOMING )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_,)  
(Print name of person filing) )  
)  
vs. )  
)  
Respondent: \_\_\_\_\_.)  
(Print name of other party)

Civil Action Case No. \_\_\_\_\_

---

### REPLY TO COUNTERCLAIM

---

Petitioner, hereby replies to Respondent's *Counterclaim for Modification* as follows:

1. Petitioner admits the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that are accurate statements)  
of Respondent's *Counterclaim*.
2. Petitioner denies the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that you believe are not accurate)  
of Respondent's *Counterclaim*.
3. Petitioner does not have information sufficient to either admit or deny the  
allegations in Paragraphs \_\_\_\_\_ of Respondent's  
(list paragraphs that you don't know are accurate or not)  
*Counterclaim*.

**WHEREFORE**, Petitioner respectfully requests that the court find generally in her/his favor and against the Respondent, that Respondent take nothing by way of his/her *Counterclaim*, and for such other and further relief as the court deems just and proper.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on the other party by  Hand Delivery OR  Faxed to this number \_\_\_\_\_ OR  by placing it in the United States mail, postage pre-paid, and addressed to the following:

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name

-----Fill in, if applicable-----  
Pursuant to Rule 102(a)(1)(B) of the Wyoming Uniform Rules of District Court the following attorney has participated in the preparation of this pleading but said attorney is NOT deemed to have entered an appearance in this matter:

\_\_\_\_\_  
Attorney's Name

Attorney's Address/Telephone:

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