

STATE OF WYOMING ) IN THE DISTRICT COURT  
 ) ss  
 COUNTY OF \_\_\_\_\_ ) \_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, ) Case Number \_\_\_\_\_  
 Person listed as Petitioner on the Petition )  
 )  
 vs. )  
 )  
 Respondent: \_\_\_\_\_, )  
 Person listed as Respondent on the Petition )

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### ACKNOWLEDGEMENT AND ACCEPTANCE OF SERVICE

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I, \_\_\_\_\_, confirm that I have received a copy of the:

- ☐ Petition for Modification of Child Support and Judgment for Arrears (If Any)
- ☐ Summons
- ☐ Confidential Statement of the Parties for Child Support Order
- ☐ Other Documents: \_\_\_\_\_

By accepting these documents, I do not waive any rights to challenge the lawsuit, court jurisdiction, or venue; except I do waive the right to challenge issues related to a defect in the Summons or its service.

I understand that I must file an Answer to the Petition for Modification of Child Support and Judgment for Arrears (If Any) with the Clerk and serve it to the Petitioner or their attorney, if they have one, within 20 days (or 30 days if I received these papers outside of Wyoming) after signing the Acknowledgment and Acceptance of Service. I understand that if I do not file an answer or response before this deadline, the Court may proceed with the modification of child support without further notice to me, a judgment by default may be taken against me, and the Petitioner

may be given what they asked for in the Petition for Modification of Child Support and Judgment for Arrears (If Any).

**DATED** \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Respondent's Signature

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

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

Home Address (Physical):\_\_\_\_\_

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

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

☐ A Wyoming Court Navigator helped with the completion of this form.

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

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_day of \_\_\_\_\_, 20\_\_\_\_.

Witness my hand and official seal.

\_\_\_\_\_  
CLERK OF COURT/NOTARIAL OFFICER

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

**CERTIFICATE OF SERVICE**

I certify that the original of this document was filed with the Clerk of the District Court in \_\_\_\_\_ County, Wyoming.

I further certify that on \_\_\_\_\_, 20\_\_\_\_, a true and accurate copy of this document was served on the other party in the following manner:

- ☐ Delivered by hand to: \_\_\_\_\_ (name)
- ☐ Faxed to this number: \_\_\_\_\_
- ☐ Mailed by United States Postal Service, postage pre-paid, to:

Name of other party or other party's attorney: \_\_\_\_\_  
Address of other party or other party's attorney: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_, 20\_\_\_\_

-----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/Email Address:

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