STATE OF WYOMING ) IN THE DISTRICT COURT

 ) ss

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ JUDICIAL DISTRICT

Plaintiff: , ) Case Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person listed as Plaintiff on the Complaint )

 )

vs. )

 )

Defendant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. )

Person listed as Defendant on the Complaint )

**ANSWER AND COUNTERCLAIM**

**TO COMPLAINT FOR DIVORCE WITH CHILDREN**

The Defendant provides the following as the answers and responses to Plaintiff’s Complaint for Divorce with Children:

1. Defendant admits the statements in Paragraphs (list paragraph numbers that are correct statements) of Plaintiff’s Complaint for Divorce.
2. Defendant denies the statements in Paragraphs (list paragraph numbers that are not correct statements) of Plaintiff’s Complaint for Divorce.
3. Defendant does not have enough information to either admit or deny the statements in Paragraphs .

**WHEREFORE**, Defendant respectfully requests that the Court find generally in Defendant’s favor and against the Plaintiff, that Plaintiff take nothing by way of their Complaint for Divorce, and for such other and further relief as the Court deems just and proper.

 **\_\_\_\_\_\_**

#### COUNTERCLAIM

**DEFENDANT** provides the following as the Counterclaim to Plaintiff’s Complaint for Divorce with Children.

|  |
| --- |
| A divorce can only be granted in Wyoming and in this county if certain requirements have been met. Carefully read the options below and check the box for every one that is true. |

Check all that apply:

1. [ ]  The Defendant currently lives in this county, and the Defendant has lived in Wyoming for at least 60 days immediately prior to (leading up to) the day this Counterclaim is filed.
2. [ ]  The Plaintiff currently lives in this county, and the Plaintiff has lived in Wyoming for at least 60 days immediately prior to (leading up to) the day this Counterclaim is filed.
3. [ ]  The marriage took place in Wyoming, and the Defendant lives in this county, and the Defendant has lived in Wyoming since the marriage took place.
4. [ ]  The marriage took place in Wyoming, and the Plaintiff lives in this county, and the

Plaintiff has lived in Wyoming since the marriage took place.

1. Defendant is currently a resident of the County of , and the State of .
2. Plaintiff and Defendant were married to each other on this date in city of County of and State of .
3. The Plaintiff and Defendant separated on this date .

1. Irreconcilable differences exist in the marriage. Plaintiff is the aggrieved party in this case and should be granted a divorce from the Defendant.

**Information About Children**

1. The Plaintiff and I are the natural or adoptive parents of the following minor children:

Child’s initials (Do not write full name):

 (For example, John Bob Doe would be J.B.D.)

Child’s year of birth: 20 \_\_\_\_\_

**Child’s residence for the past 5 years:**

|  |  |  |
| --- | --- | --- |
| Date | City and Statewhere the child lived | List the name and current address of each person who lived with the child in that location. |
| From | To |
|  | now |  |  |
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[ ]  I have attached additional pages.

Child’s initials (Do not write full name):

 (For example, John Bob Doe would be J.B.D.)

Child’s year of birth: 20 \_\_\_\_\_

**Child’s residence for the past 5 years:**

|  |  |  |
| --- | --- | --- |
| Date | City and Statewhere the child lived | List the name and current address of each person who lived with the child in that location. |
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 Child’s initials (Do not write full name):

 (For example, John Bob Doe would be J.B.D.)

Child’s year of birth: 20 \_\_\_\_\_

**Child’s residence for the past 5 years:**

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| --- | --- | --- |
| Date | City and Statewhere the child lived | List the name and current address of each person who lived with the child in that location. |
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[ ]  I have attached additional pages.

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 (For example, John Bob Doe would be J.B.D.)

Child’s year of birth: 20 \_\_\_\_\_

**Child’s residence for the past 5 years:**

|  |  |  |
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| Date | City and Statewhere the child lived | List the name and current address of each person who lived with the child in that location. |
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[ ]  I have attached additional pages.

1. The children named in this Counterclaim:(Select One)

[ ]  Have lived in Wyoming for at least 6 months before the filing of this Counterclaim or, for children under 6 months of age, have lived in Wyoming since birth.

[ ]  Have not lived in Wyoming for at least 6 months before filing this Counterclaim. (If this is the case, you may want to speak to a lawyer before filing because the Court may not be able to address custody.)

1. Other Court Cases: (Select One)

[ ]  I have NOT been involved in any other court case related to the custody, visitation support, or decision-making of the children listed in the Counterclaim, and I don’t know about any other such cases related to these children in Wyoming or in any other state.

[ ]  I have been involved in other court cases concerning custody, visitation, support, or decision-making regarding the children listed in this Counterclaim. (Complete the table below with all the information you have. If you are unsure leave the box blank. You can use the Comments section to add anything you would like the court to know about the case.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Case Number** | **Court** | **State** | **Nature of Case (unless confidential)** | **Date of Child-Custody Determination** | **Initials of Child** | **Comments** |
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1. Physical Custody of Minor Children: (Select One)

[ ]  I am not aware of any person who is not involved in this case who has physical custody of the minor children or claims to have custody or visitation rights regarding the minor children (for example, juvenile court, guardian).

[ ]  There are people who are not part of this case who have physical custody of the children or claim parental responsibilities, legal custody, physical custody, or visitation/parenting time with the children. Please provide the information of those individuals in the table below.

|  |  |  |
| --- | --- | --- |
| **Name** | **Address** | **Relationship to Child** |
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1. To the best of the Defendant’s knowledge:

[ ]  Neither party is pregnant.

[ ]  The Plaintiff is pregnant.

[ ]  The Defendant is pregnant.

**NOTE**: If either party is pregnant, you may choose to consult an attorney. Your divorce may not be able to be final until after the baby is born.

If either party is pregnant, complete **section a** below and select either i, ii, or iii.

1. [ ]  The baby is due on , 20 .
	* 1. [ ]  The Plaintiff and Defendant are the biological parents of the child.
		2. [ ]  The Plaintiff is not the biological parent of the child.
		3. [ ]  The Defendant is not the biological parent of the child.
2. Primary Care, Custody, and Control of Minor Children: (Select One)

[ ]  Both parties are fit and proper persons to share custody and control over the minor children.

[ ]  Defendant is a fit and proper person to have the primary care, custody, and control over the minor children subject to the other parent’s right of reasonable visitation.

[ ]  Plaintiff is a fit and proper person to have the primary care, custody, and control over the minor children subject to the other parent’s right of reasonable visitation.

[ ]  Defendant is a fit and proper person to have sole care, custody, and control over the minor children.

[ ]  Plaintiff is a fit and proper person to have sole care, custody, and control over the minor children.

1. Child Support: (Select One)

[ ]  Plaintiff is capable of paying child support, and the Court should order Plaintiff to pay child support.

[ ]  Defendant is capable of paying child support, and the Court should order Defendant to pay child support.

1. The Court should order the following individuals to provide medical insurance for the minor children if it can be obtained at a reasonable cost: (Select One)

[ ]  Plaintiff.

[ ]  Defendant.

[ ]  Both Parents.

1. The Court should order the following to pay any medical expenses, including any deductible or co-pay that is not covered by insurance coverage: (Select One)

[ ]  Plaintiff.

[ ]  Defendant.

 [ ]  Both Parents.

**Information About Property and Debts**

1. The parties have obtained property during their marriage which should be fairly divided by the Court (list all property that you are asking the Court to distribute. An example of this would be land and/or vehicles). If you are unsure about any information in the table below, you may leave it blank.

**NOTE**: You'll need to fill in this information here and in the Initial Disclosures form.

|  |  |  |  |
| --- | --- | --- | --- |
| **Description of Property** | **Value of Property** | **Where is property located** | **Who should get property** |
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[ ]  I have attached additional pages.

1. The following debts incurred by the parties during the marriage should be fairly divided by the Court (list all debts that you are asking the Court to assign). If you are unsure about any information in the table below, you may leave it blank.

**NOTE**: You'll need to fill in this information here and in the Initial Disclosures form.

|  |  |  |  |
| --- | --- | --- | --- |
| **Description of Debt (last 4 digits of account number)** | **Amount owed** | **Whose name is the debt in** | **Who should have to pay the debt** |
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 [ ]  I have attached additional pages.

**Information About Spousal Support**

1. Spousal Support (Alimony): (Select One)

[ ]  Neither party should be awarded spousal support.

[ ]  The Court should award Defendant spousal support in a reasonable amount (to be determined by the Court, based on Defendant’s need and Plaintiff’s ability to pay).

[ ]  The Court should award Plaintiff spousal support in a reasonable amount (to be determined by the Court, based on Plaintiff’s need and Defendant’s ability to pay).

Monthly amount of spousal support requested: $ .

Please explain the need of one party to receive spousal support and the ability of the other party to pay spousal support.

**Information About Defendant’s Name**

1. [ ]  Defendant wishes to have their previous name restored.

[ ]  Defendant wishes to keep their current name.

**WHEREFORE**, the Defendant respectfully requests that the Court:

1. Grant the Defendant a divorce from the Plaintiff and dissolve the marriage.
2. **Award Physical custody as follows**: (Select One)

[ ] Plaintiff will have primary physical custody.

 [ ]  Defendant will have primary physical custody.

 [ ] The parties will share physical custody (for example, 50/50 or some other arrangement).

[ ]  Plaintiff will have sole physical custody.

[ ]  Defendant will have sole physical custody.

1. **Award Legal custody as follows:** (Select One)

[ ]  The parties will have joint legal custody. (This means there will be shared responsibility for making major decisions about the children’s welfare, education, non-emergency healthcare, discipline, and religious training.)

If there is a disagreement, then;

 [ ]  Plaintiff has final decision-making authority.

 [ ]  Defendanthas final decision-making authority.

[ ]  Plaintiff will have sole legal custody.

[ ]  Defendant will have sole legal custody.

[ ] Other: (Please describe desired legal and physical custody arrangement in detail) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Order that: (Select One)

[ ]  Plaintiff pay child support in an amount determined by the Court using the Wyoming Child Support Guidelines.

[ ]  Defendant pay child support in an amount determined by the Court using the Wyoming Child Support Guidelines.

1. Order that the following provide health insurance coverage for the minor children: (Select One)

[ ]  Plaintiff.

[ ]  Defendant.

[ ]  Both parents.

1. Orderthat the following pay not-covered medical expenses for the minor children: (Select One)

[ ]  Plaintiff.

[ ]  Defendant.

[ ]  Both parents.

1. Order a just and equitable division of the marital property and debts.
2. Order that: (Select One)

 [ ]  No party is entitled to spousal support (alimony).

 [ ]  Plaintiff pay reasonable spousal support (alimony) to Defendant.

[ ]  Defendant pay reasonable spousal support (alimony) to Plaintiff.

1. Order that:

[ ]  Defendant’s previous name be restored.

1. Order such other and further relief as the Court deems just and equitable.

I, the Defendant, being first duly sworn upon my oath, state that I have read the above and foregoing information, and I believe the matters set forth are true and correct under penalty of perjury:

**DATED** , 20 .

Signature of Defendant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

--------------------------------------------------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:

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

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**CERTIFICATE OF SERVICE**

I certify that the original of this document was filed with the Clerk of 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