

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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### ORDER ESTABLISHING CUSTODY, VISITATION, AND CHILD SUPPORT

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**NOTE: The judge will not sign your order unless all relevant boxes are checked and all relevant information is included.**

1. This matter came before the Court by (select only one):
  - ☐ Default. (Entry of Default has been issued.)
  - ☐ Agreement of the parties. (If the parties are in agreement, both parties must sign this Order. It is also recommended that both parties write their initials at the bottom of each page.)
  - ☐ Trial.
  
2. ☐ The Petitioner currently lives in this county, and the Petitioner has lived in Wyoming for at least 60 days immediately prior to (leading up to) the day this Petition is filed.

3. ☐ The Respondent currently lives in this county, and the Respondent has lived in Wyoming for at least 60 days immediately prior to (leading up to) the day this Petition is filed.
4. The children lived in the State of Wyoming for a period of six months or more immediately before this Petition was filed.
5. Service on Respondent was completed. (Select one):
- ☐ The Respondent was served by personal service (for example, by the sheriff) on \_\_\_\_\_, 20\_\_\_\_.
- ☐ The Respondent accepted service, and an Acknowledgement and Acceptance of Service has been filed.
- ☐ The Respondent was served by publication, and a copy of the Affidavit of Publication has been filed.
- ☐ The Respondent was served by Registered Mail or Certified Mail, as issued by the Clerk of District Court pursuant to Rule 4(r)(2), W.R.C.P. The return receipt was filed, and the Clerk entered a certificate of service.
6. At least twenty days have passed since the Petition was filed.
7. Response by Respondent: (Select only one)
- ☐ The Respondent filed an Answer.
- ☐ The Respondent filed an Answer and Counterclaim.
- ☐ The Respondent did not file a response but both parties have signed and agreed to the entry of this Order.
- ☐ The Respondent did not file a response and default was entered.
8. The parties 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____
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Child's initials (Do not write full name): _____	Child's Year of Birth: 20____
Child's initials (Do not write full name): _____	Child's Year of Birth: 20____
Child's initials (Do not write full name): _____	Child's Year of Birth: 20____
Child's initials (Do not write full name): _____	Child's Year of Birth: 20____

☐ I have attached additional sheets of paper

9. This court has jurisdiction of this case.

### **Custody of the Children.**

10. Physical custody shall be as follows (select only one):

- ☐ Petitioner will have primary physical custody.
- ☐ Respondent will have primary physical custody.
- ☐ The parties will share physical custody (for example, 50/50 or some other arrangement).

Unless defined another way in this Order, **joint legal custody** means there will be shared responsibility for making major decisions about the children's welfare, education, discipline, non-emergency healthcare, and religious training.

11. Legal custody shall be as follows:

- ☐ 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;

- ☐ Petitioner has final decision-making authority.
- ☐ Respondent has final decision-making authority.
- ☐ Petitioner will have sole legal custody.

☐ Respondent will have sole legal custody.

☐ Other legal custody arrangement described in detail:

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12. The parties have an obligation to contribute to the support of the parties' minor children.

**[The remainder of this page is intentionally left blank.]**

**IT IS THEREFORE ORDERED:**

**CHILD CUSTODY, VISITATION AND SUPPORT:**

**13. Custody:** (Select only one)

- ☐ The parties shall have joint legal custody, and the Petitioner shall have primary physical custody.
- ☐ The parties shall have joint legal custody, and the Respondent shall have primary physical custody.
- ☐ The parties shall have joint legal and physical custody. The parties shall share physical custody of the minor children as described on the attached sheet of paper.
- ☐ Detailed description of shared physical custody is attached.
- ☐ Petitioner shall have sole legal and physical custody. Joint legal custody is not appropriate for the following reasons:

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- ☐ Respondent shall have sole legal and physical custody. Joint legal custody is not appropriate for the following reasons:

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- ☐ Other legal and physical custody arrangement described in detail:

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**14. Visitation:**

A custodial parent is the parent who has primary physical custody.  
A non-custodial parent is the parent who does not have primary physical custody but who may have visitation.

- ☐ The Petitioner is the non-custodial parent.
- ☐ The Respondent is the non-custodial parent.

The parties may arrange for the children to spend time with the non-custodial parent at any times that both parties agree to. If the parties cannot agree, then the children will spend time with the non-custodial parent as follows:

(Complete Sections A, B, C and D **OR** Section E Below)

**Weekend Visitation.** (Select only one)

The children shall spend time with the non-custodial parent:

- ☐ every other weekend starting on the first weekend after entry of this order.
- ☐ every weekend on which Friday is an even date.
- ☐ every weekend on which Friday is an odd date.
- ☐ other (for example, specific weekends such as 1st and 3rd): \_\_\_\_\_

Weekend visitation will begin at time: \_\_\_\_\_ ☐ A.M./ ☐ P.M day of week: \_\_\_\_\_

Weekend visitation will end at time: \_\_\_\_\_ ☐ A.M./ ☐ P.M day of week: \_\_\_\_\_

- a. **OTHER VISITATION:** In addition to the Weekend visitation above, the children shall also spend time with the non-custodial parent as follows: (specify specific days and times such as each Wednesday from 4:00 p.m. to 8:00 p.m., etc.):

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

☐ I have attached additional sheets of paper

- b. **SUMMER SCHEDULE:**

(Select One Option)

☐ **Option 1:**

- ☐ Custodial parent
- ☐ Non-custodial parent

Shall have visitation with the parties' children beginning \_\_\_\_\_  
\_\_\_\_\_ and continuing until \_\_\_\_\_  
\_\_\_\_\_

(for example, beginning 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.).

☐ **Option 2:** The summer schedule will remain the same as during the school year.

☐ **Option 3:** The summer schedule will be as follows:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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- c. **HOLIDAY SCHEDULE:** The following holiday schedule will take priority over the regular weekday, weekend, and summer schedules described above. Fill in the blanks below with custodial parent or non-custodial parent to indicate who the children will be with 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 children will remain with the parent they are normally scheduled to be with.

**Location of exchange and transportation arrangements** for the following holidays or events shall follow the instructions set forth in paragraph **Section J below** unless stated otherwise.

**(Be very specific about the days, times, and locations where exchanges will take place.)**

Holiday/ Event	Odd numbered years	Even numbered years	Every year	<b>Day, Time, and Place of Exchange</b> Describe from start to end (for example, Friday when school lets out, pick up at school, until Monday at 6 p.m., Burger Shop parking lot)
	(Custodial parent or non-custodial parent)			
<input type="checkbox"/> Mother’s Day Weekend	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

<input type="checkbox"/> Memorial Day Weekend	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Father's Day Weekend	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> July 4 <sup>th</sup>	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Labor Day Weekend	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Thanksgiving Break <b>First part</b>	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Thanksgiving Break <b>Second part</b>	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Winter Break <b>First part</b>	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Winter Break <b>Second part</b>	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Spring Break <b>First part</b>	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Spring Break <b>Second part</b>	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> Children's Birthdays	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	



Religious/Other Events				
<input type="checkbox"/> (Specify):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> (Specify):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	
<input type="checkbox"/> (Specify):	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	

☐ I have attached additional sheets of paper

- d. ☐ **OTHER (including no visitation or supervised visitation):** If you require a schedule that is difficult to explain in the format above or if your situation is unique such that visitation is not appropriate or requires supervision, please provide a detailed visitation schedule that fits your needs or an explanation of why visitation is not appropriate on a separate sheet of paper and attach it.
- e. **TEMPORARY CHANGES TO THE SCHEDULE:** Any schedule for sharing time with the children may be changed as long as both parents agree to the changes ahead of time, in writing.

**NOTE:** This written agreement for a temporary change does not need to be filed with the Court, but both parents should keep a copy for their records.

- f. **PERMANENT CHANGES TO THE SCHEDULE:** Once the Judge signs the final Order and approves this Visitation Plan, any permanent changes to the schedule must be agreed upon by both parties and approved by the Court or modified directly by the Court. If you seek a permanent change, it is recommended that you consult with an attorney. However, you may also pursue this change on your own (pro se). To modify the schedule, you will need to file a request for modification with the court. Even if both parties agree to the change, Court approval is still required. A modification can also be requested even if the parties do not agree.

g. **PARENT-CHILD COMMUNICATION:** Both parents and children shall have the right to communicate by telephone, in writing or by electronic means during reasonable hours without interference or monitoring by the other parent, unless otherwise ordered by the Court.

h. **MUTUAL RESPECT:** Parents will not say things or knowingly allow others to say things in the presence of their children that would take away the children's love and respect for the other parent such as saying negative things about the other parent.

i. **OTHER TERMS:**

(Complete Section C if applicable)

a. **The party who has custody of the children or the party who is exercising visitation with the children shall:**

- i. Care for, control, protect, and reasonably discipline the children;
- ii. Provide the children with adequate food, clothing, and shelter, and medical and dental care;
- iii. Promote and encourage the training and education of the children;
- iv. Respect the other party's rights and responsibilities regarding the other party's time with and care of the children.

b. **Visitation MAY NOT be reduced or denied because support is not paid.**

c. Add any other items regarding the children you would like to include concerning visitation. \_\_\_\_\_

☐ I have attached additional sheets of paper

j. **EXCHANGE OF CHILDREN/COST OF TRANSPORTATION:** Both parents shall have the children ready on time and at the agreed-upon time of exchange. All clothing that accompanied the children shall be returned to the other parent at the end of that particular visitation. All transportation in connection with the visiting

parent’s exercise of his/her visitation shall be the responsibility of and/or paid for as follows:  
**(Select One Option)**

☐ **Option 1:** While both parents continue to reside within \_\_\_\_ miles of each other, both parents shall be responsible for transportation costs for one-way of the children’s transportation.  
The ☐ custodial parent **OR** the ☐ non-custodial parent shall pick up the children from \_\_\_\_\_ (location) at the beginning of the visitation and the ☐ custodial parent **OR** the ☐ non-custodial parent shall pick up the children at the end of the visitation from \_\_\_\_\_ (location). If either party moves \_\_\_\_\_ miles or more away, then the costs for transportation shall be as follows:  
\_\_\_\_\_  
\_\_\_\_\_

☐ **Option 2:** The non-custodial parent shall be responsible for all of the children’s transportation costs. The non-custodial parent shall pick up the children from \_\_\_\_\_ (location) at the beginning of the visitation and shall return the children to \_\_\_\_\_ (location) at the end of the visitation.

☐ **Option 3:** Other: (provide details exchange and transportation costs):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** The child support amount may depend on the custodial arrangement that is ordered by the Court. If each parent keeps the children overnight for more than twenty-five percent (25%) of the year and both parents contribute substantially to the expenses of the children in addition to the payment of child support, a “shared responsibility child support” obligation shall be determined by use of the tables. Also, when each parent has physical custody of at least one (1) of the children, a “shared responsibility child support” obligation for all of the children shall be determined by use of the tables. See W.S. §20-2-304(c) and (d). For assistance in calculating child support, go to the following website: <https://childdsupport.wyoming.gov/calculator/index.html> or call your local child support enforcement agency.

## 15. CHILD SUPPORT:

In accordance with W.S. § 20-2-304, presumptive child support is calculated as follows:

- a. Number of children: \_\_\_\_\_
- b. Petitioner's net monthly income is: \$\_\_\_\_\_
- ☐ Actual (Petitioner submitted a Confidential Financial Affidavit)

**OR**

☐ Imputed the Petitioner did not submit a Confidential Financial Affidavit; therefore, income is imputed, and an Affidavit of Imputed Income has been filed with the Court.

- c. Respondent's net monthly income is: \$\_\_\_\_\_
- ☐ Actual (Respondent submitted a Confidential Financial Affidavit)

**OR**

☐ Imputed the Respondent did not submit a Confidential Financial Affidavit; therefore, income is imputed, and an Affidavit of Imputed Income has been filed with the Court.

- d. Total child support obligation of both parents is: \$\_\_\_\_\_
- e. Petitioner's presumptive child support obligation is: \$\_\_\_\_\_
- f. Respondent's presumptive child support obligation is: \$\_\_\_\_\_

- g. **Restriction on reducing amount of child support:** No agreement which is *less than* the presumed child support amount in the law shall be approved if public support/benefits (such as aid under the personal opportunities with employment responsibilities (Personal Opportunities with Employment Responsibilities (POWER) program, Title 19, Kid Care, food stamps, supplemental security income (SSI) or other similar benefits) are being paid on behalf of any of the children.  
(Select One Option)

- ☐ The children receive public assistance.
- ☐ The children DO NOT receive any public assistance.

- h. **Amount of Child Support:**

- ☐ Petitioner
- ☐ Respondent

Shall pay \$\_\_\_\_\_ per month for child support. The amount of child support is based upon:

**(Select One Option)**

- a. ☐ The presumptive amount of child support determined by Wyoming's Child Support Guidelines
- b. ☐ There is a deviation (an adjustment) ☐ upwards or ☐ downwards from the presumptive amount. (In order to deviate, there must be a specific finding that the application of the presumptive child support would be unjust or inappropriate, and that the deviation is in the best interest of the children). The reasons that the presumptive amount is unjust is because (list the specific reasons):

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- i. **Time of Payments:** Child support payments shall begin:  
**(Select One Option)**

☐ On THE FIRST DAY OF THE MONTH beginning the month of \_\_\_\_\_, 20\_\_\_\_\_ and shall continue to be paid on the first day of the month thereafter, until further order of the Court;

☐ Beginning on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ and continuing as follows: \_\_\_\_\_

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- j. **CONTINUATION OF 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 20. Child support shall terminate if, during the child's minority, the child marries, is legally emancipated, or dies.

**PLACE:**

All payments required under this Order, shall be made to one of the two following addresses:

Clerk of the District Court, whose address is (see District Court Clerks Addresses in this packet):	<b>OR</b>	State Disbursement Unit 2300 Capitol Ave. Hathaway Bldg., 5 <sup>th</sup> Floor, Suite A Cheyenne, WY 82002
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CASH ACCEPTED IN PERSON ONLY. CASHIER'S CHECKS AND MONEY ORDERS ACCEPTED. CHECK WITH YOUR LOCAL DISTRICT COURT CLERKS OFFICE REGARDING PAYING BY PERSONAL CHECK.

**WARNING:** Child support payments made directly to the other parent, instead of through the Clerk of District Court or the State Disbursement Unit, may be considered a gift and not credited as child support.

The Clerk or SDU shall promptly forward the support payments to the receiving parent at the address provided by that parent. **Each party shall pay, when due, all fees charged to that party by the Clerk of District Court, State Disbursement Unit, and any other agency statutorily authorized to charge a fee.**

**MODIFICATION:** Either party may seek a modification of the child support ordered herein pursuant to W.S. §20-2-311.

**MODIFICATION OF CHILD SUPPORT IS NOT EFFECTIVE UNLESS IT IS APPROVED BY A WRITTEN ORDER SIGNED BY THE JUDGE.**

**ENFORCEMENT:** Wyoming law 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. This judgment is subject to a 10% late payment penalty if it is not paid within 32 days.

16. **MEDICAL INSURANCE:**

- a. Health care insurance coverage for the minor children shall be provided if insurance can be obtained at a reasonable cost, as defined by law, and the benefits under the insurance policy are accessible to the children by the:

**(Select One Option)**

- ☐ Petitioner  
☐ Respondent  
☐ Both parents

- b. Proof. The insuring parent shall provide to the Court and the other parent written proof that the insurance has been obtained within 60 days of entry of this Order. Proof of insurance coverage shall contain, at a minimum:

1. The name of the insurer.
2. The policy number.
3. The address to which all claims should be mailed.
4. A description of any restrictions on usage, such as pre-approval for hospital admission, and the manner in which to obtain pre-approval.
5. A description of all deductibles.
6. Two copies of claim forms.

- c. Changes. The insuring parent shall provide written notice to the Clerk of this Court and the other parent if insurance coverage for the child is denied, revoked, or altered in any way that would affect the child's coverage, including any change relating to the information required above.

- d. Failure to Provide Insurance. The Court may hold a parent in contempt for refusing to provide the ordered insurance or for failing or refusing to provide the information required above. In addition, if either parent fails to provide insurance or proof of insurance as required by this agreement, the other parent may provide such insurance and the parent who was supposed to shall be responsible to pay to the other parent the cost of such insurance plus the costs that parent had to pay for collection, including reasonable attorney's fees.

- e. Costs Not Paid for By Insurance. All deductibles, co-payments and other expenses for health care that are not paid for by health insurance shall be paid by the parents as follows:

**(Select One Option)**

☐ 50% each by Petitioner and Respondent.

☐ \_\_\_\_\_% by Petitioner and \_\_\_\_\_% by Respondent.

- a. If the insuring parent fails to pay the insurance premium, all health care expenses of the children not covered by insurance shall be the responsibility of that party.
- b. If the insuring parent fails to maintain insurance as required, that party may be found in Contempt of Court and may be required to pay or reimburse the expenses and costs set forth in W.S. §20-2-401(e).

**17. CHANGES IN ADDRESS AND EMPLOYMENT:**

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.

**18. INCOME WITHHOLDING ORDER:**

An income withholding order shall be entered and shall become effective as follows:

**(Select One Option)**

- ☐ Effective immediately (**Recommended**);
- ☐ Effective upon the date the Obligor (person who has to pay) requests withholding commence; or the date the Obligor is at least one (1) month behind in child support payments. List the reasons why good cause exists to delay the effective date for withholding income: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- ☐ OTHER (e.g. Military allotment) \_\_\_\_\_

**19. TAX EXEMPTION:**

The parties shall claim as income tax dependency exemptions on federal and state tax returns as follows:

Initials of Children	Parent Entitled to Claim	Year Allowed to Claim
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent	<input type="checkbox"/> every <input type="checkbox"/> odd <input type="checkbox"/> even <input type="checkbox"/> Other: _____

provided that the party required to pay child support is only entitled to claim the exemption(s) if he/she is current on his/her child support obligation as of December 31<sup>st</sup> of the year in which the exemption(s) is claimed. The parties shall sign all necessary tax forms to allow the other party to claim the exemption(s) as stated above.

**20. ENFORCEMENT OF ORDER:**

Either party or, when appropriate, the department of family services has the right to petition to enforce an order pursuant to W.S. §20-2-201 through 20-2-204, 20-2-310 and 20-2-311(d).

**Contempt - Pursuant to W.S. §20-2-204 and 20-2-310, a court having jurisdiction to enforce or revise the Order may, upon appropriate motion of either parent, require a parent to appear before the court and show just cause why the parent should not be held in contempt, upon a showing that the parent has willfully violated the Order as to the care, custody, visitation and maintenance of the children. The court may, in addition to any assessment it may impose upon a finding that the parent is in contempt of court, award attorney's fees, costs, and such other and further relief as the court may deem necessary under the circumstances, to the parent aggrieved by the violation of the Order, in order to enforce and require future compliance with the Order.**

**21. LIMITED REPRESENTATION:**

Following Rule 1.2(c) of the Wyoming Rules of Professional Conduct, any attorney who has entered a limited appearance for the purpose of obtaining an Order is now discharged.

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

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DISTRICT COURT JUDGE

**CHECK ONLY ONE BOX, AND SIGN WHERE INDICATED IN THAT SECTION ONLY:**

☐ **If the parties have agreed (both parties sign and have signatures notarized):**

I certify that I have read the foregoing Order and that I understand and agree to the terms and agree to the entry of this Order.

\_\_\_\_\_  
**Petitioner's signature**

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

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
Witness my hand and official seal.

\_\_\_\_\_  
NOTARIAL OFFICER/CLERK

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

**[The remainder of this page is intentionally left blank.]**

I certify that I have read the foregoing Order and that I understand and agree to the terms and agree to the entry of this Order.

\_\_\_\_\_  
**Respondent's signature**

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

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
Witness my hand and official seal.

\_\_\_\_\_  
NOTARIAL OFFICER/CLERK

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

☐ **If default has been entered and the Respondent did not respond:**

The above is true and accurate and I want the court to approve:

\_\_\_\_\_  
Petitioner's signature

☐ **If a court hearing was held:**

APPROVED AS TO FORM: (This means you think everything above looks accurate.)

\_\_\_\_\_  
Petitioner's signature

\_\_\_\_\_  
Respondent's signature

Copies to:

Plaintiff/Petitioner's or Attorney's Name and Address:

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

Defendant/Respondent's or Attorney's Name and Address:

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