STATE OF WYOMING)	IN	NTHE DISTRICT COURT
COUNTY OF) ss _)		JUDICIAL DISTRICT
Petitioner:	,)	Case Number	
Person listed as Petitioner on the F	Petition)		
vs.)		
Respondent:))		
Person listed as Respondent on the			

RESPONSE AND COUNTERCLAIM TO PETITION TO ESTABLISH CUSTODY, VISITATION, AND CHILD SUPPORT

The Respondent provides the following as the answers and responses to Petitioner's Petition to Establish Custody, Visitation, and Child Support ("Petition"):

- 1. Respondent admits the statements in Paragraphs (list paragraph numbers that are correct statements) _______ of Petitioner's Petition.
- 2. Respondent denies the statements in Paragraphs (list paragraph numbers that are not correct statements) _______ of Petitioner's Petition.
- 3. Respondent does not have enough information to either admit or deny the statements in Paragraphs ______.

WHEREFORE, Respondent respectfully requests that the Court find generally in Respondent's favor and against the Petitioner, that Petitioner take nothing by way of their Petition to Establish Custody, Visitation, and Child Support, and for such other and further relief as the Court deems just and proper.

COUNTERCLAIM

This Petition is to establish custody, visitation, and child support if you and the other parent were never married and both parents are listed on the birth certificate for each child, or a prior court order established paternity for each child. If paternity has not been acknowledged or established, please see your local child support agency for assistance.

RESPONDENT provides the following as the Counterclaim to Petitioner's Petition to Establish Custody, Visitation, and Child Support.

1. The Respondent is a resident of _____ County Wyoming and has lived in the State of Wyoming for more than sixty (60) days prior to the filing of this Counterclaim.

Information About Children

2. The Petitioner 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 _____

Paternity was established by:

□ An Acknowledgement of Paternity (Father is on the birth certificate)

□ Attach copy of Acknowledgement of Paternity or Birth Certificate

□ An Order Establishing paternity

 \Box Attach a copy of the Order

Child's residence for the past 5 years:

Da	ate	City and State	List the name and <u>current</u> address of each person
From	То	where the child lived	who lived with the child in that location.
	now		

 \Box 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 _____

Paternity was established by:

□ An Acknowledgement of Paternity (Father is on the birth certificate)

□ Attach copy of Acknowledgement of Paternity or Birth Certificate

 \Box An Order Establishing paternity

 \Box Attach a copy of the Order

Child's residence for the past 5 years:

Da From	ate To	City and State where the child lived	List the name and <u>current</u> address of each person who lived with the child in that location.
	now		

 \Box 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

Paternity was established by:

□ An Acknowledgement of Paternity (Father is on the birth certificate)

□ Attach copy of Acknowledgement of Paternity or Birth Certificate

□ An Order Establishing paternity

 \Box Attach a copy of the Order

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	now		

 \Box I have attached additional pages.

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

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Paternity was established by:

□ An Acknowledgement of Paternity (Father is on the birth certificate)

□ Attach copy of Acknowledgement of Paternity or Birth Certificate

□ An Order Establishing paternity

\Box Attach a copy of the Order

Child's residence for the past 5 years:

Da From	ate To	City and State where the child lived	List the name and <u>current</u> address of each person who lived with the child in that location.
	now		

 \Box I have attached additional pages.

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

 \Box 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.

 \Box 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.)

4. Other Court Cases: (Select One)

 \Box 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.

 \Box 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

5. Physical Custody of Minor Children: (Select One)

 \Box 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).

 \Box 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

6. Primary Care, Custody, and Control of Minor Children: (Select One)

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

 \Box Respondent 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.

□ Petitioner 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.

 \Box Respondent is a fit and proper person to have sole care, custody, and control over the minor children.

 \Box Petitioner is a fit and proper person to have sole care, custody, and control over the minor children.

7. Child Support: (Select One)

□ Petitioner is capable of paying child support, and the Court should order Petitioner to pay child support.

□ Respondent is capable of paying child support, and the Court should order Respondent to pay child support.

- 8. 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)
 - \Box Petitioner.
 - \Box Respondent.
 - \Box Both Parents.
- 9. 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)
 - □ Petitioner.
 - \Box Respondent.
 - \Box Both Parents.

WHEREFORE, the Respondent respectfully requests that the Court:

1. <u>Award Physical custody as follows</u>: (Select One)

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

2. <u>Award Legal custody as follows</u>: (Select One)

 \Box 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.

 \Box Petitioner will have sole legal custody.

 \Box Respondent will have sole legal custody.

 \Box Other: (Please describe desired legal and physical custody arrangement in detail)

3. Order that: (Select One)

□ Petitioner pay child support in an amount determined by the Court using the Wyoming Child Support Guidelines.

□ Respondent pay child support in an amount determined by the Court using the Wyoming Child Support Guidelines.

- 4. Order that the following provide health insurance coverage for the minor children: (Select One)
 - \Box Petitioner.
 - \Box Respondent.
 - \Box Both parents.

- 5. Order that the following pay not-covered medical expenses for the minor children: (Select One)
 - \Box Petitioner.
 - \Box Respondent.
 - \Box Both parents.
- 6. Order such other and further relief as the Court deems just and equitable.

I, the Respondent, 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 Respondent_			
Printed Name:			
Phone Number:			
Home Address (Dhysical)			
Home Address (Physical)	•		
	<u>.</u>		
Mailing Address:	<u>.</u>	 	

 \Box A Wyoming Court Navigator helped with 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:

CERTIFICATE OF SERVICE

I certify that the original of this document was file	d with the Clerk of Circuit Court in
County, W	Vyoming.
I further certify that on	, 20, a true and accurate copy of
this document was served on the other party in the follow	wing manner:
\Box Delivered by hand to: (nam	e)
□ 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_	