

☐ The original Child Support Order has been modified (changed). The most recent modification was by the _____ Court in _____ County in the State of _____.

5. I believe this Court is allowed to modify this Order because: (Select all that apply)

- ☐ The children live in Wyoming.
☐ I live in Wyoming.
☐ The Respondent lives in Wyoming.
☐ The Child Support Order from a different state has been registered in Wyoming.

Important Note: If none of the above are true, you might not be able to ask a Wyoming court to modify your Child Support Order. You might choose to get legal advice to learn about your options.

Information About Children

The most recent Child Support Order is about 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 State where the child lived	List the name and <u>current</u> address of each person who lived with the child in that location.
From	To		
	now		

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

☐ I have attached additional pages.

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Date		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.
From	To		
	now		

☐ I have attached additional pages.

Information About the Current Court Order

6. The date on the current Order (either the original Order or the most recent modification) is:

_____ (The date will probably be somewhere near the top
of the first page of the Order.)

7. This is what the current Order says about child support:

☐ Nothing because child support was not Ordered.

☐ The non-custodial parent is required to pay \$_____ per month as child support. The next payment is due on _____, 20__.

☐ The non-custodial parent is required to pay \$_____ per month in arrears (child support payments that were not made on time). The next payment is due on _____, 20__.

8. On the day I'm filing this Petition:

☐ The non-custodial parent does not owe any unpaid child support because the parent is current on payments or was not Ordered to make payments.

OR

☐ The non-custodial parent is in arrears (owes unpaid child support). The total amount that was already due but has not been paid is \$_____. I would like the Court to enter a judgment against the non-custodial parent for this amount plus any additional amounts that may accrue (add up) before an Order is entered in this action.

☐ I have attached to this Petition a copy of the payment record from the Clerk of District Court or the Child Support Program.

9. This is what the current Order says about medical insurance:

☐ The custodial parent is required to provide medical insurance for the children.

☐ The non-custodial parent is required to provide medical insurance for the children.

☐ Neither party is required to provide medical insurance for the children.

10. ☐ One of the parents is required to provide medical insurance, and

☐ that parent does provide medical insurance as Ordered.

☐ that parent does not provide medical insurance as Ordered.

11. This is what the current Order says about uncovered (out-of-pocket) medical expenses:

☐ The custodial parent is required to pay ____% of uncovered medical expenses and the non-custodial parent is required to pay ____%.

☐ The current Order doesn't say anything about uncovered medical expenses.

12. ☐ All uncovered medical expenses have been paid in the way the current Order requires.

OR

☐ The custodial parent owes \$_____ in uncovered medical expenses. I would like the Court to enter a judgment against the custodial parent for this amount plus any additional amounts that may accrue (add up) before an Order is entered in this action.

☐ I have attached bills and receipts that explain these uncovered medical expenses.

☐ The non-custodial parent owes \$_____ in uncovered medical expenses. I would like the Court to enter a judgment against the non-custodial parent for this amount plus any additional amounts that may accrue (add up) before an Order is entered in this action.

☐ I have attached bills and receipts that explain these uncovered medical expenses.

13. ☐ Neither party has been Ordered to provide medical insurance. I am asking the Court to Order that medical insurance be provided by:

☐ me.

☐ the Respondent.

14. ☐ The current Order doesn't say anything about uncovered medical expenses. I am asking the Court to Order that all expenses not covered by insurance be divided in the following manner:

_____ % to be paid by me.

_____ % to be paid by the Respondent.

Reason For Modification Request

15. I am asking for a modification of the Child Support Order because:

☐ The current Child Support Order was issued more than six months ago, and I believe the monthly child support amount, calculated using the guidelines in Wyoming Statute 20-2-304, will now be at least 20% different (either higher or lower) than the amount required in the current Order.

☐ It has been at least three years since the Court last reviewed the child support amount. I am asking the Court to adjust the amount according to the current child support guidelines.

☐ Since the current Order was issued, there has been a substantial change in circumstances that justifies modifying at least one of the child support and medical support and insurance obligations. The following circumstances have changed since the current Ordered was issued. (Select all that apply.)

☐ One or more children are no longer owed support because they have been emancipated or have reached the age of majority. ("Age of majority" means a person who is 18 years old, but for child support purposes, a parent's obligation may continue beyond this age if the child is mentally or physically disabled and unable to support themselves, or is between the age of 18 and 20 and is attending high school or an equivalent program full-time.)

☐ The net income of one or both parents has substantially changed. ("Net income" is the income remaining after money is taken out for personal income taxes, social security, the cost of health care coverage for all dependent children, payments made under existing support Orders for other children, other current court-Ordered obligations, and mandatory pension deductions. Payments towards child support arrears are not deducted when calculating net income.)

☐ The financial needs of the children have increased due to age or changes in the cost of living.

☐ The obligations of the parties to provide medical support and the rights of the children to receive medical support require review and modification.

☐ Other: (Please describe)

WHEREFORE, the Petitioner respectfully requests:

1. The parties be Ordered to complete and file Confidential Financial Affidavits as required by Wyoming Statute 20-2-308.
2. The Court review the Child Support Order and modify it to an amount consistent with the Wyoming Child Support Guidelines.
3. If applicable, the Court review and modify the medical insurance obligation and the allocation of costs not covered by medical insurance.
4. If applicable, the Court enter a judgment for child support arrears (unpaid child support) and for unpaid medical expenses not covered by medical insurance.

5. Other:

6. Order such other and further relief as the Court deems necessary, just, and equitable.

I, the Petitioner, being duly sworn under penalty of perjury, state that I have read the above information, and I believe it is true and correct.

DATED: _____, 20__.

Petitioner's Signature

Printed Name: _____

Phone Number: _____

Home Address (Physical): _____

Mailing Address: _____

Email Address: _____

☐ 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:

