STATE OF WYOMING	)	IN THE DISTRICT COURT
COUNTY OF	) ss )	JUDICIAL DISTRICT
Petitioner: (Print name of person filin	,) ng)	Civil Action Case No
vs.	)	
Respondent:(Print name of other party	.)	
ACKNOWLED	GEMENT ANI	D ACCEPTANCE OF SERVICE
		, hereby acknowledge receipt of a copy of the
		upport and Judgment of Arrears, and Confidential
Statement of the Parties for Ch	hild Support O	rder, filed in this case. In accepting service of
process, I retain all defenses or	objections to	the lawsuit or to the jurisdiction or venue of the
court except for objections based	d on a defect in	the Summons or in the service of the Summons. I
understand that I must answer or	r otherwise plea	nd within 20 days from this date (30 days if copies
of the papers were received ou	tside of Wyom	ning) and that if I fail to file an answer or other
pleadings with the Clerk of this	Court and serve	e the same upon the Petitioner in accordance with
the Wyoming Rules of Civil P	rocedure within	n the time limits stated, I will be in default and
Petitioner may be afforded the re	elief demanded	in the <i>Petition</i> without a trial or other hearing.
DATED this	day of	
		nt's Signature mber:
		/Zip Code:
Subscribed and sworn to 20	before me on the	his day of,
WITNESS my hand and official	seal.	
		Notarial Officer
My Commission Expires:		

CN CSMP07 Acknowledgement and Acceptance of Service Effective: July 1, 2023.
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## **CERTIFICATE OF SERVICE**

I certify that on	(date) the original of this document was
filed with the Clerk of District Court; and, a	true and accurate copy of this document was served
on the other party by   Hand Delivery OR [	Faxed to this number
OR  by placing it in the United States mail	, postage pre-paid, and addressed to the following:
(Print Other Party's/Other Party's Attorney's	Name and Address)
TO:	
	<del></del>
	Your signature
	Print name