

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

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )  
 )  
vs. )  
 )  
Respondent: \_\_\_\_\_ )  
(Print name of other party) )

Civil Action Case No. \_\_\_\_\_

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### AFFIDAVIT IN SUPPORT OF DEFAULT

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

THE PETITIONER, who is of lawful age being first duly sworn deposes and states as follows:

1. Petitioner has filed a *Petition for Modification of Custody and/or Support* in this case.
2. Respondent was served with a copy of the *Petition* and *Summons* by one of the following methods:

The Respondent was served with a copy of the *Petition* and *Summons* by a duly authorized Deputy or the Sheriff of \_\_\_\_\_ County, State of \_\_\_\_\_ on \_\_\_\_\_.  
(insert date)

**OR**

The Respondent filed an *Acknowledgment and Acceptance of Service* acknowledging that on \_\_\_\_\_  
(insert date)  
he/she received a copy of the *Petition* and the *Summons*.

**OR**

An *Affidavit to Allow Service by Publication* was filed and the Respondent was served by publication in the \_\_\_\_\_ Newspaper on the following dates:  
\_\_\_\_\_.

**OR**

The Respondent was served with a copy of the *Petition* and *Summons* by Certified Mail, Restricted Delivery, Return Receipt requested on \_\_\_\_\_ (insert date), as evidenced by the green postal signature card attached.

3. More than  20 days (if served in Wyoming);  30 days (if served outside of Wyoming by publication or by Certified Mail), excluding the day of service, have elapsed since the date of service.
4. That the Respondent failed to answer or otherwise plead as required by law. The Respondent is not a minor or incompetent and is not in the military service of the United States. This Affidavit is executed for the purpose of enabling Petitioner to obtain an *Entry of Default* against the Respondent.

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

\_\_\_\_\_  
Signature  
Printed Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Subscribed and sworn to before me by \_\_\_\_\_ this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Witness my hand and official seal.

\_\_\_\_\_  
Notarial Officer

My Commission Expires: