

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. \_\_\_\_\_

---

**ACKNOWLEDGEMENT AND ACCEPTANCE OF SERVICE**

---

I, \_\_\_\_\_, hereby acknowledge receipt of a copy of the  
(Print Respondent's Name)  
*Summons, Petition to Establish Custody, Visitation, and Child Support ("Petition")*, and  
*Confidential Statement of the Parties for Child Support Order*, 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 on a defect in the *Summons* or in the service of the  
*Summons*. I understand that I must answer or otherwise plead within 20 days from this date (30  
days if copies of the papers were received outside of Wyoming) and that if I fail to file an answer  
or other pleadings with the Clerk of this Court and serve the same upon the Petitioner in  
accordance with the Wyoming Rules of Civil Procedure within the time limits stated, I will be in  
default and Petitioner may be afforded the relief demanded in the *Petition* without a trial or other  
hearing.

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

\_\_\_\_\_  
Respondent's Signature  
Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip Code: \_\_\_\_\_

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

WITNESS my hand and official seal.

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

My Commission Expires:

**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: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Your signature

\_\_\_\_\_  
Print name