STATE OF WYOMING)	IN THE DISTRICT COURT		
COUNTY OF) ss)	JUDICIAL DISTRICT		
Petitioner:(Print name of person filing)	,)	Civil Action Case No		
Vs.)			
Respondent:(Print name of other party))			
REQUEST FOR SETTING				
The Petitioner OR Fine In the District Court. The hearin minutes and will address	g/trial will ta			
Establishing Custody, Visitation,	and Child Su	ment (both parties have signed the <i>Order</i> and this Court requires a hearing the <i>Order Setting Hearing</i> if this option		
Court requires a hearing before it	will enter an	Petitioner OR Respondent and this Order Establishing Custody, Visitation, etting Hearing if this option is selected);		
hearing is needed on the following Allocation o Child support Motion for	able to agree issues: f parental resp rt	on all of the terms of this action and a consibilities		
Other: Other: (NOTE: submit the <i>Order Setting</i>	Hearing if the	is option is selected); OR		
	hild support.	e on any issues and a trial is needed to (NOTE: submit the <i>Order Setting Trial</i>		
, , , , , ,	•	f a particular matter by the official court official court reporter as soon as possible,		

but no later than three (3) working days before the matter is set for hearing. You can provide notice to the court reporter by phone or by submitting a written request. Please note that if providing notice through the mail, the request must be received by the court reporter no later than three working days prior to the hearing. The clerk will be able to inform you which court reporter to contact. The three-day notice requirement will not be waived by the Court. The notice is required for all civil matters including jury trials. If a hearing is not recorded by an official court reporter, a transcript of the hearing will not be available. It is very difficult to appeal the Judge's decision if you do not have a transcript of everything that is said at the trial. Rule 904 of the Uniform Rules of the District Courts of the State of Wyoming.

DATED this	day of	, 20
		Signature
		Printed Name:
		Address:
		Phone Number:
	ERTIFI	CATE OF SERVICE
_		(date) the original of this document
-		Court; and, a true and accurate copy of this document
		Hand Delivery OR Faxed to this number
<u></u> *		it in the United States mail, postage pre-paid, and
addressed to the followin		
(Insert Other Party's/Other	er Party's A	Attorney's Name and Address)
TO:		
		Your signature
		Print name