STATE OF WYOMING)	IN THE DISTRICT COURT
COUNTY OF) ss)	JUDICIAL DISTRICT
Petitioner:	,)	Civil Action Case No.
(Print name of person filing))	
)	
vs.)	SUMMONS
)	
Respondent:	.)	
(Print name of other party)	,	
To the above named Respondent:		
Print Respondent's Name:		
Home Address:		
Phone:		
Employer Name & Address:		

YOU ARE HEREBY SUMMONED and required to file with the Clerk and serve upon the Plaintiff or Plaintiff's attorney if s/he has one, an Answer to the *Petition for Modification of Child Support and Judgment for Arrears* ("Petition") which is herewith served upon you, within 20 days after service of this Summons upon you, exclusive of the day of service. (If service upon you is made outside of the state of Wyoming, you are required to file and serve your answer to the Petition within 30 days after service of this Summons upon you, exclusive of the day of service.) If you fail to do so, judgment by default will be taken against you for the relief demanded in the Petition.

Dated _____, 20____.

(Seal of District Court)

Clerk of Court

By: _____ Deputy Clerk_____

Petitioner's Name

Address

Phone Number

STOP: SHERIFF WILL FILL THIS OUT (Attach to Summons)

<u>RETURN</u>

STATE OF WY	OMING)							
COUNTY OF) ss)	TO BE USED BY WYOMING SHERIFF, UNDER						
			SHERIFF OR DEPUTY						
I,	in the	he State aforesai	d do her	_, She eby cer	eriff in and f tify that I receive	or said Coun d the within Sur	ity of		
together with a ("Petition")filed	i copy of the in the above of	Petition for Me entitled matter, a	odificatio and that l	on of C I served	Thild Support and the same in the C ering a copy of the	Judgment for A County aforesaid	Arrears on the		
				By:	Sheriff Deputy Sheriff				
Sheriff's fees:	Service,	\$; Return						
	Mileage	\$	<u>;</u> Total	\$					
		AFFIDA	VIT OF	SERV					
STATE OF COUNTY OF _					A PERSON OTHI SHERIFF OR DE		MING		
			heing fi	rst dulv	sworn, on oath de	noses and save th	nat s/he		
service of said	Summons in by of the same,	ot a party to the the County afor	foregoing resaid on	g action	or interested ther day of day of day for Modification	ein, and that s/he, 20	e made , by		
Name:									
Address:									
				By:					
Subscril	bed and sworn	to before me this	S	da	y of	, 20			
			Notaria	1 Office					
My Commission Summons	n Expires:		Tiotalla		<u>, , , , , , , , , , , , , , , , , , , </u>				

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