

# Packet 5

## Child Support Modification Forms and Procedures For Wyoming PETITIONER 2023

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**IMPORTANT NOTE:** Make sure you are using the most recent packet.  
Check the Wyoming  
Judicial Branch website (<https://www.courts.state.wy.us/>)  
or ask the Clerk of District Court  
to confirm there is not a packet with a more recent effective date.

LIST OF FORMS – PACKET 5  
PETITIONER - CHILD SUPPORT MODIFICATION

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\*All underlined forms are required to modify child support where the parties agree.

\*\*Other forms may be required by your Court.

## CHILD SUPPORT MODIFICATION INFORMATION AND INSTRUCTIONS

**CONFIDENTIALITY:** If you have concerns about keeping information confidential, such as your address and/or social security number, please consult an attorney. You should also know that Domestic Violence Protection Orders or Stalking Orders are available free of charge at the circuit court clerks' offices. You may request assistance in obtaining Domestic Violence Protection or Stalking Orders from your local domestic violence or sexual assault program or you may call the Wyoming Coalition Against Domestic Violence & Sexual Assault (844) 264-8080 (toll free) or (307) 755-0992. There are also private attorneys who may be willing to assist clients in these matters. If you have ever obtained a Protection Order, this information should be indicated in the *Petition for Modification of Child Support and Judgment for Arrears* or the *Counterclaim*.

**Read through the following information and instructions before completing the forms to ensure that you qualify to file for a modification of child support in Wyoming. You must fill out all forms as completely as possible. If your forms are not complete, the Judge may reject your packet.**

**This packet is to modify child support only.** If you are modifying custody, visitation or parenting time with your children, a separate packet is available.

### A. Qualifying for a modification of child support:

#### 1. If your situation fits one of the following three (3) categories, you may file a petition to modify your current child support order:

##### a. Twenty (20%) percent change in support amount after six (6) months.

Any child support order that was entered more than six (6) months prior to the petition or which has not been adjusted within *six (6) months* from the date of filing of the petition may be reviewed and adjusted if the court finds that the support amount would **change by twenty percent (20%) or more** per month from the amount of the existing child support order; OR

b. Substantial change of circumstances. A modification based on a **substantial change of circumstances** may be brought at **any time**. If you begin receiving public assistance such as POWER, Title 19, Kid Care, food stamps and/or supplemental security income (SSI), then your situation shall be considered a substantial change of circumstances requiring modification of child support. Other changes, including custody modifications, may also be sufficient. (If you are seeking a change of custody as well as a change in the child support order, please use the custody modification packet or seek the advice of an attorney); OR

c. Every three (3) years. Every three years, upon request, the court is required to review and, if appropriate, adjust the child support order. There is no

need for a showing of a change of circumstances if it has been at least three years since the previous child support order was entered.

**If your situation fits one of the categories described above, you may move forward with this packet.**

**Step 1. Getting Started.** If you qualify to file for a modification of your current child support order, the following forms are necessary in all uncontested modification cases. It is recommended that you complete all of these forms before you file the *Petition for Modification of Child Support and Judgment for Arrears* so that they will be ready to file at the appropriate time:

1. Petition for Modification of Child Support and Judgment for Arrears
2. Summons
3. Confidential Statement of the Parties for Child Support Order
4. Acknowledgement and Acceptance of Service
5. Confidential Financial Affidavit (both parties must file a financial affidavit)
6. Order Modifying Child Support and Judgment for Arrears
7. Order for Income Withholding
8. Income Withholding for Support (Or, you can also open up a case with your local child support enforcement agency and they will prepare this form for you)

\*\*Other forms may be required depending on the Court and on your situation. If additional forms are needed, they will be discussed below where applicable.

***Remember, your packet contains many forms that will not be required in all situations. Be sure to follow these instructions carefully to ensure you have completed the correct forms for your situation.***

**Step 2. File the Petition.** In order to advise the Court that you wish to modify your current child support order, you must file the *Petition for Modification of Child Support and Judgment for Arrears* (“Petition”). If you are filing the *Petition*, you are the “Petitioner” regardless of whether you were the Plaintiff or the Defendant when the child support order was first entered. The other party will be referred to as the “Respondent.”

**Notarizing Signatures.** Some forms will require you to have your signature notarized. Notarial Officers may administer the oath and witness your signature, or in many cases, Clerks of Court will be willing to administer the necessary oath. Each Clerk’s office has their own policy so check with them first before seeking notarization of your signature on the forms.

The *Petition* is given to the **Clerk of the District Court** where the original child support order was issued. Ask the Clerk for your case number. Delivering the *Petition* to the Clerk’s Office is called **filing** a case. A **filing fee** is required. Ask the Clerk what the amount of the filing fee is and what forms of payment are accepted. You will also need to file the ***Confidential Statement of the Parties for Child Support Order*** and have the Clerk issue the ***Summons***.

**Case Number:** You will need to use the same case number assigned to the original child support order. You must include that case number on all further paperwork in the “**caption.**” The caption is the top section of a pleading, motion, or petition stating the name of the Petitioner, Respondent, court and the case number.

Take the original and two (2) copies of each document to the Clerk’s office. The Clerk will give copies of each document back to you after stamping them with the date they were filed. This is called a “**file stamp.**” You should keep one copy of each document for your records. The other set of documents will need to be served upon the Respondent.

**RECAP for Step 2:** Start the modification action by filing the following documents with the Clerk of the District Court’s office located in the county courthouse where your original child support order was established:

- A. ***Petition for Modification of Child Support and Judgment of Arrears;***
- B. *Summons; and*
- C. ***Confidential Statement of the Parties for Child Support Order***
- D. Pay the ***filing fee***
- E. Take the original and two (2) copies of each document to the Clerk’s office.
  - a. The Clerk will give you both copies back after file-stamping them
  - b. You should keep one copy for your records.
  - c. The other set of documents will need to be served upon the Respondent.

**Step 3. Serve the Respondent.** Once the *Petition* and the *Confidential Statement of the Parties for Child Support Order* are filed, a file-stamped copy of each must be formally given to (a/k/a **served** on) the Respondent. **Personal service** of the *Petition*, *Confidential Statement of the Parties* and *Summons* on the Respondent by a **Sheriff** is required **unless** the Respondent completes an ***Acknowledgment and Acceptance of Service*** form. Formal service is required for the *Petition* and *Confidential Statement of the Parties for Child Support Order* so the Court has proof that the other party actually received the paperwork. Other forms of service exist, but these are the easiest methods that meet the formal service requirement for a *Petition*. If you cannot serve the Respondent by either of these methods, ask the Clerk for additional forms for alternative methods of service.

You **MUST** give the Respondent official notice that you have filed a *Petition* and *Confidential Statement of the Parties for Child Support Order* **within 90 days** from the date that you filed them. This is done by serving a file-stamped copy of the *Summons*, the *Petition*, and the *Confidential Statement of the Parties for Child Support Order* upon the Respondent, or by having the Respondent sign an *Acknowledgment and Acceptance of Service* form stating a copy of those documents were received. If you do not serve the Respondent within 90 days, your case can be dismissed by the Court.

A. **How to Serve the Respondent.** Choose **ONLY ONE** of the following options to serve the Respondent:

**Option 1– Service by Sheriff**

***Summons.*** It is recommended to have a Sheriff in the county where the Respondent can be found serve him or her with the papers. There will be a separate **service fee** (usually fifty

(\$50.00) dollars in Wyoming). You can contact the Sheriff's department in the county where the respondent lives to determine the fee charged by the Sheriff. This is also true if the Respondent is going to be served out of state. You will need to provide the Sheriff with a file-stamped copy of the *Summons, Petition* and *Confidential Statement of the Parties for Child Support Order* to be served on the Respondent.

**Proof of Service.** The Sheriff's office will complete the last page of the *Summons* called the "***Return***" (or they may have their own form - an "***Affidavit of Service***") and will usually file the original with the Clerk's office and send you a copy. If you receive what looks like the original "***Return***" or "***Affidavit of Service***" from the Sheriff, call the Clerk's office to ensure the original has been filed. If it has not, then file the original with the Clerk's office and keep a copy for yourself. This is the proof that the Respondent was given proper notice.

**Note:** Once the Respondent has been served, you MUST file the original *Summons* and *Return* (or *Affidavit of Service*) with the Clerk's office so that the Judge knows that proper service was made.

**OR:**

**Option 2 – Acknowledgement and Acceptance of Service.** If the Respondent agrees, he or she may sign a form stating that a file-stamped copy of the *Summons, Petition* and *Confidential Statement of the Parties for Child Support Order* were received. If the Respondent agrees, you will need to fill out an *Acknowledgement and Acceptance of Service* form. The Respondent must sign this document in front of a notarial officer.

**Proof of Service.** Once the *Acknowledgement and Acceptance of Service* form is signed, take the original and two (2) copies of the signed form to the Clerk's office for filing. You should keep one copy for your records and provide the other copy to the Respondent.

**Note:** You must file the signed *Acknowledgment and Acceptance of Service* form and the original *Summons* with the Clerk's office so that the Judge knows that proper service on the Respondent was made.

**RECAP for Step 3:** You MUST give the Respondent official notice that you have filed a *Petition* within 90 days from the date you filed the *Petition*. Choose one of the following methods:

**Option 1 – Service by Sheriff**

- A. Provide a file-stamped copy of the *Summons, Petition* and *Confidential Statement of the Parties for Child Support Order* to the Sheriff where the Respondent lives;
- B. Pay the *service fee*; and
- C. Once the Respondent is served, be sure the original *Summons* and *Return* or *Affidavit of Service* are filed with the Clerk's office; **OR**

**Option 2 – Acknowledgement and Acceptance of Service**

- A. Provide a file-stamped copy of the *Summons, Petition* and *Confidential Statement of the Parties for Child Support Order* to the Respondent;
- B. Have the Respondent sign the *Acknowledgment and Acceptance of Service* form in front of a notarial officer; and
- C. File the original *Acknowledgment and Acceptance of Service* form with the Clerk's office.
- D. File the original *Summons* with the Clerk's office.

**Step 4. Wait for the Respondent’s time to respond to expire.** Once the Respondent is served, he or she has 20 days (if served in the State of Wyoming) or 30 days (if served out-of-state) to file a **Response** to the *Petition*. You must wait for the appropriate time period to expire before you can proceed with the case. You must wait the 20 days (or 30 days if served out-of-state) even if the Respondent tells you that he or she is not going to file a *Response*.

- **Computation of Time Limits.** In computing most time limits, unless otherwise stated, the day the document is served shall not be included. The last day of the time period is included, unless it lands on a Saturday, a Sunday, or a legal holiday, or, if the Courthouse is closed then the time limit will be on the very next day that the Courthouse is open. **If you have questions about time limits, you should seek the advice of an attorney.**
- While waiting, move on to **Step 5**. You can also use this time to continue to work on the other required forms to be sure they are filled out completely and correctly.

**RECAP for Step 4:** You MUST wait for the Respondent’s time to file a *Response* to expire before you can proceed with your case. In the meantime:

- A. Mark on the calendar when the time to respond expires;
- B. Move on to **Step 5** while waiting; and
- C. Use this time to ensure the required forms are filled out completely and correctly.

**Step 5. Initial Disclosures.** The law requires certain information be made available to the other party within thirty (30) days after the Respondent’s *Response* is required to be served on the Petitioner (use the table in 5.A. below to determine date). The information consists of a schedule of financial assets; schedule of non-financial assets; schedule of all debts owed individually or jointly; location(s) of safety deposit box(es); employment information; and information regarding other income and retirement accounts. Both parties are required to provide this information in order to fully disclose finances of the parties relating to the calculation of child support.

Please note that “A party must make its disclosures based on the information then reasonably available to it and is not excused from making its disclosures because it has not fully completed its investigation of the case or because it challenges the sufficiency of another party’s disclosures or because another party has not made its disclosures.”

A. **WHEN TO PROVIDE:** Your Initial Disclosures must be provided to the Respondent (or his/her attorney) **WITHIN 30 DAYS AFTER THE RESPONDENT’S RESPONSE IS REQUIRED TO BE SERVED ON YOU** (use table below). **Be sure to keep a copy of your Initial Disclosures form for your records.** Use the following to determine the date when you and the Respondent are required to provide initial disclosures to one another:

1. Begin with the date the Respondent was served with the Petition:  
\_\_\_\_\_
2. Next, determine when the Respondent is required to file a *Response*:
  - a. If the Respondent was served in Wyoming, add 20 days to the date in #1:  
\_\_\_\_\_
  - OR
  - b. If Respondent signed an Acknowledgement and Acceptance of Service, add 20 days to the date in #1: \_\_\_\_\_
  - OR
  - c. If the Respondent was served out-of-state, add 30 days to the date in #1:  
\_\_\_\_\_
3. Add 30 days to the date in #2(a), (b), or (c): \_\_\_\_\_

The date set forth in #3 is the date by which you and the Respondent must provide your completed Initial Disclosures forms to one another.

**B. DO NOT FILE THE INITIAL DISCLOSURES WITH THE COURT.** This form is only given to the Respondent (or his/her attorney).

**RECAP for Step 5:** You MUST provide your *Initial Disclosures* to the Respondent within 30 days after the Respondent's *Response* is required to be served on you (use the table in 5.A. above to determine date). Mark on the calendar the deadline to send your *Initial Disclosures*; and

- A. Send your *Initial Disclosures* to the Respondent by the deadline.
- B. DO NOT file the *Initial Disclosures* with the Clerk's office.

\*\*\*\*\*

**Step 6.** Once the time for the Respondent to file a *Response* has expired and you sent your *Initial Disclosures* to the Respondent, then several options exist to move your case forward to get a modification of your child support order. Pick the option that best describes your situation:

**Option A.** If the Respondent filed a *Response* or *Response and Counterclaim* and you both agree on all of the issues of your case, follow **Option A** below.

**Option B.** If the Respondent did not file a *Response* or *Response and Counterclaim*, follow **Option B** below.

**Option C.** If the Respondent filed a *Response* or *Response and Counterclaim* and you do NOT agree on all of the issues of your case, follow **Option C**.

**Option A. The following instructions apply if the Respondent filed a Response or Response and Counterclaim, and you both agree on all of the issues of your case.** If you and the Respondent agree on the issues involved in your case, then you will need to complete the following:

A. **Fill out a *Confidential Financial Affidavit* and attach all required documents.**

- Both parties are required to file a *Confidential Financial Affidavit* including the required attachments with the Court. If the Respondent does NOT file a *Confidential Financial Affidavit*, you will need to complete an *Affidavit of Imputed Income* to show the Court how much money the Respondent makes. This is an additional form contained in your packet.
- **Required Attachments.** The *Confidential Financial Affidavits* of the parties must be supported with documentation of both current and past earnings. Proper documentation of current earnings includes, but is not limited to, pay stubs, employer statements, or receipts and expenses if self-employed. Documentation of current earnings shall be supplemented with copies of the most recent tax return to provide verification of earnings over a longer period. Include copies of income tax returns for the previous two years and your most recent pay stub(s) to show how much you have made so far this year.

B. Fill out an *Order Modifying Child Support and Judgment for Arrears*. This form will need to be filled out completely, signed by both you and the Respondent and both of your signatures notarized. **In addition to signing the *Order*, you should also initial each page of the *Order* to verify that each page contains the terms you agreed upon.** Here are some important laws and helpful hints in completing the *Order*:

**Important Child Support Laws:**

- a. **Recipients of certain public benefits.** Recipients of public assistance, such as POWER, are required to assign their rights to support to, and cooperate with, the department of family services in the establishment of parentage and the establishment, enforcement and modification of support obligations. If you or your children receive public benefits, contact your Department of Family Services Caseworker or local child support enforcement office as a modification of child support may have an impact on your benefits. **Wyo. Stat. §20-6-105.**
- b. **Military Personnel:** Military regulations specify that military duty will not be used as a basis for avoiding family support obligations, but setting the level of support is a civilian matter. It is most common to set the support obligation based on basic military pay. You can go to [www.dfas.mil](http://www.dfas.mil) for updates on military pay and many other issues. If military pay and benefits are an issue in your child support case, you

may want to contact an attorney for assistance. The following is also a helpful website: <https://www.acf.hhs.gov/css/resource/a-handbook-for-military-families> .

- c. **Overtime compensation:** Overtime compensation is not counted in the “net income” unless the court, after considering all overtime earnings derived in the preceding twenty-four (24) month period, determines the overtime earnings can reasonably be expected to continue on a consistent basis.
- d. **Entry of income withholding order.** An income withholding order (IWO) enables an employer to take child support out of the pay of the parent obligated to pay. The court always enters an IWO which takes effect immediately, unless the parties agree otherwise, or unless one (1) of the parties demonstrates, and the court finds, that there is good cause not to require immediate income withholding. When the parties agree to an alternative arrangement, the arrangement must be in writing, signed by the parties and reviewed and entered in the record by the court. The court shall include in the record its findings of good cause, including a statement explaining why implementation of immediate income withholding would not be in the best interests of the child and, in cases involving modification of child support, proof of timely payments.

An income withholding order which did not become effective immediately upon entry, becomes effective upon the earliest of the following: (i) the date the parent paying requests withholding commence; or (ii) child support becomes delinquent in payment of an amount equal to one (1) month's support obligation under the support order.

- e. **Limits on amounts withheld:** The total amount that can be withheld from any employee's paycheck is limited by the Consumer Credit Protection Act (CCPA). The limits provided in the CCPA are fifty percent (50%) of disposable earnings if the parent who pays child support has a second family and sixty percent (60%) if there is no second family. These limits are each increased by five percent (5%) if payments are in arrears for a period equal to twelve (12) weeks or more. See definition of disposable income in paragraph 4 below.
- f. **Social security or veteran's benefits.** If your children receive part of a parent's social security or veteran benefits, you might want to contact an attorney or legal services program for assistance with child support calculation. If a proportion of a support obligor's (person who is supposed to pay child support) social security or veteran's benefit is paid directly to the custodian (parent or guardian with custody of the children) of the obligor's children who are the subject of the child support order, the total amount of the social security or veteran's benefit, including the amounts paid to the obligor and custodian under the child support order, will be counted as gross income to the obligor (count the amount the children receive as income to the parent who has to pay support). You will need to calculate the child support due and subtract the amount of the social security or veteran's benefit sent directly to the custodial parent from the noncustodial (obligor's) parent's share of presumptive support. If the

subtraction of the social security or veteran's benefit sent directly to the custodian results in a negative dollar amount, the support amount shall be set at zero. The child support obligation shall be offset by the amount of the social security or veteran's benefit sent directly to the custodian, beginning from the time the custodian began receiving the social security or veteran's benefit. **Wyo. Stat. §20-2-304(e).**

- g. **Date new amount of child support begins.** An order for child support is not subject to retroactive modification except: (i) Upon agreement of the parties; or (ii) The order may be modified with respect to any period during which a petition for modification is pending, but only from the date notice of that petition was served on the Respondent. **Wyo. Stat. §20-2-311(d).**
- h. **When the child support obligation ends.** An on-going child support obligation terminates when the:
  - (i) Parents marry or remarry *each other* (After the remarriage of the parents to each other, the court may eliminate all child support arrearage existing between the parents except those assigned to the state of Wyoming);
  - (ii) Child dies;
  - (iii) Child is legally emancipated; or
  - (iv) Child attains the age of majority. (See “age of majority” definition below.)

## **IMPORTANT DEFINITIONS:**

- a. **"Obligor"** means a person who owes a duty of support for a child.
- b. **"Payor"** means any employer or other person who pays income to an obligor and who has or provides health care coverage to employees.
- c. **"Arrearage"** means past due child support, past due medical support, past due spousal support, attorneys fees, guardian *ad litem* fees, costs, interest and penalties, but, does not include property settlements.
- d. **"Income"** means *any* form of payment or return in money or in kind to an individual, regardless of source. Income includes, but is not limited to wages, earnings, salary, commission, compensation as an independent contractor, temporary total disability, permanent partial disability, permanent total disability, worker's compensation payments, unemployment compensation, disability, annuity and retirement benefits and any other payments made by any payor.
- e. **The following is not “income”:** Means tested sources of income such as Pell Grants, aid under the Personal Opportunities With Employment Responsibilities (POWER) Program, food stamps and Supplemental Security Income (SSI) shall not be considered as income.
- f. **“Net” or “Disposable” income** is the gross income minus total mandatory deductions. **Mandatory deductions:** federal income tax withheld, social security tax

(FICA) withheld, state income tax withheld, and other deductions required by law, such as required disability contributions and/or required retirement contributions. The cost of dependant health care coverage for dependent children may be deducted too.

g. **“Imputed income”** can be used when either parent is voluntarily unemployed or underemployed. In such case the child support shall be computed based upon the potential earning capacity (imputed income) of the unemployed or underemployed parent. In making that determination the court shall consider:

- 1) Prior employment experience and history;
- 2) Educational level and whether additional education would make the parent more self-sufficient or significantly increase the parent's income;
- 3) The presence of children of the marriage in the parent's home and its impact on the earnings of that parent;
- 4) Availability of employment for which the parent is qualified;
- 5) Prevailing wage rates in the local area;
- 6) Special skills or training; and
- 7) Whether the parent is realistically able to earn imputed income.

h. **"Age of majority"** means a person eighteen (18) years of age, *except* for purposes of child support obligations, a parent's legal obligation for the support of his or her children, whether natural or adopted, continues past the age of majority in cases where the children are: (i) mentally or physically disabled and thereby incapable of self support; or (ii) between the age of majority and twenty (20) years and attending high school or an equivalent program as full-time participants.

## **ADDITIONAL INFORMATION FOR CALCULATING CHILD SUPPORT:**

- **Child Support Payments.** You will need to determine the amount of child support due based upon the *Confidential Financial Affidavits* you and the Respondent completed (or by the *Affidavit of Imputed Income* if the Respondent did not complete his/her own *Confidential Financial Affidavit*). You may use the ***Child Support Computation Form*** as a guide to help you calculate the support due. Another option is to go online to:

<https://childdsupport.wyoming.gov/calculator/index.html>

to calculate child support.

- **You CANNOT agree that no support will be paid.** The statutes allow for a reduced amount of support when you agree on joint physical custody and each parent keeps the child(ren) overnight for more than twenty-five percent (25%) of the year and both parents contribute substantially to the expenses of the children in addition to the payment of child support.
- If the difference between the noncustodial parent's net income and the self-support reserve is less than the support obligation as calculated from

the tables in 20-2-304(a), the support obligation shall be set using the difference between the noncustodial parent's net income and the self-support reserve. "Self-support reserve" means the current poverty line for one (1) person as specified by the poverty guidelines updated periodically in the Federal Register by the United States department of health and human services under the authority of 42 U.S.C. 9902(2). See W.S. § 20-2-304(f).

- There are NO DEVIATIONS from the presumed support allowed UNLESS the Court CHOOSES to deviate from the set amount because the amount was unjust or inappropriate in the particular case. The Court must include the specific reasons for deviation in the *Order*.
- **NO AGREEMENTS FOR LESS THAN THE PRESUMED SUPPORT CAN BE APPROVED IF GOVERNMENT OR STATE BENEFITS (SUCH AS TITLE 19, KID CARE, FOOD STAMPS, POWER, ETC.) ARE BEING PROVIDED ON BEHALF OF ANY CHILD.** This means the Court cannot lower the amount of child support calculated by using the net income of you and the Respondent even if you and the Respondent agree to a lower amount of support.
- **Medical Support.** The law requires that medical support for the child(ren) be included as part of any child support order. The Court shall order either or both of the parents to provide medical support, if insurance can be obtained at a reasonable cost and the benefits under the insurance policy are accessible to the children. This may include dental, optical or other health care needs for the child(ren). In addition, the Court will order that any medical expenses not covered by insurance and any deductible amount on the required insurance coverage be paid by one or both parents. If both parents are ordered to pay for expenses not covered by insurance, the Court will specify the proportion for which each parent is responsible (for example, 50% to Plaintiff and 50% to Defendant).

C. Fill out an ***Order for Income Withholding***. The Court is required by statute to enter an *Order for Income Withholding* in every case where child support has been ordered.

D. Fill out an ***Income Withholding for Support***. This form is required if you need to have the child support paid directly from a non-custodial parent's employer. If you need assistance in filling out this form, or if you need assistance in collecting child support, you should contact the child support enforcement agency in your district. The Clerk can provide you with the agency's contact information.

E. **Other Forms:** The Court may also require other forms depending on the county where your case is filed. Ask the Clerk if additional forms are required.

F. **Copies and Envelopes.** Take an original and two (2) copies of each of the above documents for filing with the Clerk and two (2) addressed, stamped envelopes (one addressed to you and one to the Respondent with enough postage to cover the cost of mailing the *Order* to you and the Respondent). A copy of any documents that you file (other than the *Order*) must be sent to the Respondent on the date that you filled out on the *Certificate of Service* on each document.

- If a hearing is not required by your Court, the Clerk will mail a copy of your *Order* if accepted by the Court.
- If a hearing is required by your Court, follow the next steps:

G. **Hearing.** In some Courts, a hearing is required before the Judge will sign the *Order*. If this is the case, you will need to request a hearing by completing the **Request for Setting**. If you have reached an agreement, check the first box in paragraph 2 that states that the parties have both signed the *Order*. Indicate how much time you will need for the hearing (usually 15 minutes if there is an agreement). You will file the **Order Setting Hearing** with the Clerk's office, and the Court will fill in the hearing date and time and mail a copy to you and the Respondent. You will need to provide an addressed, stamped envelope for you and the Respondent to the Clerk. These documents are additional forms contained in your packet.

H. **Evidence.** At the hearing, you will need to inform the Judge that you meet the requirements for a modification of a child support order, that you have calculated child support based on the net income of the parties, and whether or not the children are receiving public benefits. You will also give the *Order* signed by both you and the Respondent to the Judge. The Judge may ask you additional questions. The Judge will not guide you through the hearing, tell you how to proceed or advise you on the law. Following the hearing, the Judge will make any necessary changes to the *Order* and will sign it.

I. **When will your child support order be modified?** Your order modifying child support will not be effective until the Judge signs the *Order* and it is filed with the Clerk. This process may take time if the Judge requires changes to the proposed *Order*. You must verify with the Clerk that the *Order* has been file-stamped before you can be sure your child support order has been modified.

**RECAP for Option A:** If you and the Respondent agree on all issues in the case and the Respondent filed a *Response* or *Response and Counterclaim*, complete the following:

Remember: Take an original and two copies of each document to file with the Clerk's office. You will need to send a copy of any filed document to the Respondent unless otherwise stated below.

1. *Confidential Financial Affidavit*
2. *Order for Income Withholding*
3. *Income Withholding for Support* (or, you can open up a case with your local child support enforcement agency)
4. *Order Modifying Child Support Order and Judgment of Arrears*
  - Take an original and two (2) copies of the *Order* for filing with the Clerk and two (2) addressed, stamped envelopes (one addressed to you and one to the Respondent with enough postage to cover the cost of mailing the *Order* to you and the Respondent).

5. Complete and file any additional documents required by your Court.
6. If your Court requires a hearing before entering an *Order*, then, you will also need to file and do the following:
  - *Request for Setting*
  - *Order Setting Hearing*
  - Take an original and two (2) copies of the *Order Setting Hearing* for filing with the Clerk and two (2) addressed, stamped envelopes (one addressed to you and one to the Respondent with enough postage to cover the cost of mailing the *Order Setting Hearing* to you and the Respondent).
  - Attend the Hearing

**Your child support order has been modified when the *Order* has been signed by the Judge and filed by the Clerk.**

## **Option B. If the Respondent does not file a *Response* or *Response and Counterclaim*, obtain a default *Order* by following these steps:**

A. **Default Order.** After the required waiting period has expired, you may obtain what is referred to as a default order if the Respondent does NOT file a *Response* or *Response and Counterclaim* to the *Petition*.

B. **Necessary forms.** Fill out and sign the *Application for Entry of Default* and *Affidavit in Support of Default*. Take an original and two (2) copies of these documents to the Clerk and the blank *Entry of Default*. If your paperwork is correct, the Clerk will sign the *Entry of Default*. These are additional forms located in your packet.

C. **Additional Documents.** After the *Entry of Default* is signed by the Clerk, complete **Step 6, Option A, items A through F** above. **MAKE SURE TO MARK “DEFAULT” ON ORDER.**

D. **Default Hearing.** Some Courts will not enter a *Default Order Modifying Child Support and Judgment for Arrears* unless there is a hearing. Ask the Clerk if this is required for your Court. If it is, fill out a *Request for Setting* and request 15 minutes for the hearing. You will file the *Order Setting Hearing* with the Clerk’s office, and the Court will fill in the hearing date and time and mail a copy to you and the Respondent. You will need to provide an addressed, stamped envelope for you and the Respondent to the Clerk.

E. **Evidence.** At the hearing, you will need to inform the Judge that you meet the requirements for a modification of a child support order, that you have calculated child support based on the net income of the parties, and whether or not the children are receiving public benefits. You will also give the *Order* to the Judge. The Judge may ask you additional questions. The Judge will not guide you through the hearing, tell you how to proceed or advise you on the law. Following the hearing, the Judge will make any necessary changes to the *Order* and will sign it.

F. **When will your child support order be modified?** Your child support order will not be modified until the Judge signs the *Order* and it is filed with the Clerk. This may take

time if the Judge requires changes to the proposed *Order*. You must verify with the Clerk that the *Order* has been file-stamped before you can be sure your child support has been modified. The time limit to appeal an *Order* begins to run from the day the *Order* is filed with the Clerk's office.

**RECAP for Option B:** If the Respondent did NOT file a *Response* or *Response and Counterclaim*, complete the following:

Remember: Take an original and two copies of each document to file with the Clerk's office. You will need to send a copy of any filed document to the Respondent unless otherwise stated below.

1. *Application for Entry of Default*
2. *Affidavit in Support of Default*
3. *Entry of Default* (Clerk will sign if your paperwork is correct)
4. *Confidential Financial Affidavit*
5. *Affidavit of Imputed Income*
6. *Order for Income Withholding Order*
7. *Income Withholding for Support* (Or, you can also open up a case with your local child support enforcement agency and they will prepare this form for you)
8. *Order Modifying Child Support and Judgment for Arrears*. **MAKE SURE TO MARK "DEFAULT" ON DECREE.**
  - Take an original and two (2) copies of the *Order* for filing with the Clerk and two (2) addressed, stamped envelopes (one addressed to you and one to the Respondent with enough postage to cover the cost of mailing the *Order* to you and the Respondent).
9. Complete and file any additional documents required by your Court.
10. If your Court requires a hearing before entering an *Order*, then, you will also need to file and do the following:
  - *Request for Setting*
  - *Order Setting Hearing*
  - Take an original and two (2) copies of the *Order Setting Hearing* for filing with the Clerk and two (2) addressed, stamped envelopes (one addressed to you and one to the Respondent with enough postage to cover the cost of mailing the *Order Setting Hearing* to you and the Respondent).
  - Attend the Hearing

Your child support order has been modified when the *Order* has been signed by the Judge and filed by the Clerk.

### **Option C. If the Respondent files a *Response* or *Response and Counterclaim*, and you and the Respondent do NOT agree on all issues of your case, you will need to have a trial:**

A. **You must file a *Reply to the Counterclaim***. If the Respondent has filed a *Response and Counterclaim*, you will have a time limit (usually 20 days) to file a written response (***Reply to Counterclaim***) to the counterclaim. The original, signed copy of your reply must be filed with the Clerk and a copy must be sent to the Respondent (or his/her attorney).

- **Caution:** If you do not file the original *Reply to Counterclaim* with the Clerk within the time allowed, the Respondent can seek a default order against you and may get what he/she asked for in his/her counterclaim.

B. **Trial.** If there is no agreement, your case will have to be heard and decided by a Judge at a trial.

- **Caution:** It is strongly recommended that you hire or find an attorney to represent you at trial, though you may represent yourself. You proceed at your own risk and will be expected to know the laws.

C. **Request a trial date.** You will need to request a hearing by completing a *Request for Setting*. Write in “trial” where it asks the type of hearing. Indicate how much time you think it will take for you and the other party to present your evidence and write that in (usually one (1) to three (3) hours). You also need to decide whether or not you want a Court reporter to record the proceeding. SEE BELOW FOR DETAILS ON GETTING A COURT REPORTER. 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 get a Court reporter to take down everything that is said at the trial.

- You must file the *Request for Setting* and the *Order Setting Modification Trial and Requesting Pretrial Statements* with the Clerk’s office, and the Court will fill in the hearing date and time and mail a copy to you and the other party. You will need to provide an addressed, stamped envelope for you and the Respondent to the Clerk. Both the *Request for Setting* and the *Order Setting Modification Trial and Requiring Pretrial Statements* are additional forms contained in your packet.

D. **Pretrial Disclosures.** - Both parties must provide to other party AND PROMPTLY FILE WITH THE COURT the *Pretrial Disclosures* regarding the evidence that it may present at trial. If you have questions, you should contact an attorney.

- When are the *Pretrial Disclosures* due? Unless otherwise directed by the Court, these disclosures must be made at least **30 days before trial.**
- Take the original and two (2) copies to the Clerk for filing. Keep one copy for your records and send the other copy to the Respondent (or his/her attorney).

E. **Settlement before trial.** In the event that your case settles before the trial, you must present the Court with the completed and signed *Order Modifying Child Support and Judgment for Arrears* in writing before the Court will take the trial off of the schedule. There will be no continuances or canceling of the trial date based on telephone calls. If you need a continuance, you should contact an attorney for assistance in seeking one.

F. **Court reporter.** If you wish to have a court reporter, you shall provide notice to the 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.

G. **Evidence and witnesses.** At the hearing, you will need to present your evidence and witnesses. If the *Order Setting Modification Trial and Requesting Pretrial Statements* is entered (signed by the Judge), you must follow the terms and provide the Court with the information requested in that document, including copies of exhibits you want to introduce at the trial and a list of your proposed witnesses and what their testimony is going to be about within the time frame ordered (usually 3 to 5 days prior to the trial). Under the law, the Judge cannot help you or assist you at trial. You are on your own without an attorney.

H. **Final Decision (Order).** Following the trial, the Judge will make a decision or may take the matter under advisement, meaning he or she will need to think further before making a determination. If the Judge instructs you, you must take that decision and type it into the *Order Modifying Child Support and Judgment for Arrears* incorporating the Judge's decision.

- **You are again reminded that, if you choose to continue without an attorney, you are expected to know what to do and how to do it. The Judge will not guide you through the trial/hearing, tell you how to proceed or advise you on the law.**
- **You MUST also file the documents outlined in Step 6, Option A, items C through F above.**

I. **When will your child support order be modified?** Your child support order will not be modified until the Judge signs the *Order* and it is filed with the Clerk of Court. This process may take time if the Judge requires changes to the proposed *Order*. You must verify with the Clerk's office that the *Order* has been file-stamped before you can be sure your child support order has been modified. The time limit to appeal the *Order* begins to run from the day the *Order* is filed with the Clerk's office.

**RECAP for Option C:** If the Respondent filed a *Response* or *Response and Counterclaim* and you do NOT agree on the issues, complete the following:

Remember: Take an original and two copies of each document to file with the Clerk's office. You will need to send a copy of any filed document to the Respondent unless otherwise stated below.

1. If the Respondent filed a *Response and Counterclaim*, file a *Reply to the Counterclaim* within 20 days after you receive the *Response and Counterclaim*.
2. Request a trial date
  - a. *Request for Setting*
  - b. *Order Setting Modification Trial and Requiring Pretrial Statements*
  - c. Take an original and two (2) copies of the *Order Setting Modification Trial and Requiring Pretrial Statements* for filing with the Clerk and two (2) addressed, stamped envelopes (one addressed to you and one to the Respondent with enough postage to cover the cost of mailing the *Order Setting Modification Trial and Requiring Pretrial Statements* to you and the Respondent).
3. File your *Pretrial Disclosures* and *Pretrial Memorandum*
4. No later than 3 days before the trial, request a court reporter, if desired.
5. Attend the Trial
6. *Order Modifying Child Support and Judgment of Arrears*
  - a. Take an original and two (2) copies of the *Order* for filing with the Clerk and two (2) addressed, stamped envelopes (one addressed to you and one to the Respondent with enough postage to cover the cost of mailing the *Order* to you and the Respondent).
7. *Order for Income Withholding*
8. *Income Withholding for Support* (Or, you can also open up a case with your local child support enforcement agency and they will prepare this form for you)
9. Complete and file any additional documents required by your Court.

**Your child support order is modified when the *Order* has been signed by the Judge and filed by the Clerk.**

**CHECKLIST FOR PACKET 5  
PETITIONER - MODIFICATION OF CHILD SUPPORT**

**STEP 1.** These forms are required in all cases where you and the Respondent agree on all of the issues:

- Petition for Modification of Child Support and Judgment of Arrears
- Summons
- Confidential Statement of the Parties for Child Support Order
- Acknowledgment and Acceptance of Service
- Confidential Financial Affidavit (both parties must file a financial affidavit)
- Order Modifying Child Support and Judgment of Arrears
- Order for Income Withholding Order
- Income Withholding for Support (Or, you can also open up a case with your local child support enforcement agency and they will prepare this form for you)

\*Other forms may be required based on your situation or on the Court where you are filing your petition. If other forms are required based on your situation, they will be discussed below. You will need to check with the Clerk to determine if the Court requires further documents.

**STEP 2.** File the *Petition* in the District Court in the county where the original child support order was entered. Take an original and two copies with you. The Clerk will keep the original. Keep one copy for yourself. The other copy is for service upon the Respondent as described in **Step 3**.

- Petition for Modification of Child Support and Judgment of Arrears*
- Summons*
- Confidential Statement of the Parties for Child Support Order*
- Pay filing fee (check with Clerk for amount and payment options)

**STEP 3.** Serve the Respondent (Choose 1 option below).

- Respondent signed the *Acknowledgment and Acceptance of Service* form
  - File original *Acknowledgment and Acceptance of Service* form with the Court; **OR**
- Respondent was personally served by the Sheriff
  - File original *Return* or *Affidavit of Service* completed by Sheriff with the Court.
  - File original *Summons* with the Court.

- STEP 4.** Wait the required time for Respondent to file a *Response* to the Petition.
- 20 days have elapsed.** Respondent was personally served in the State of Wyoming or signed an *Acknowledgement and Acceptance of Service* form; **OR**
  - 30 days have elapsed.** Respondent was personally served outside the State of Wyoming.

- STEP 5.** Complete the *Initial Disclosures*
- Send the *Initial Disclosures* to the Respondent within **30 days** after the Respondent was personally served by the Sheriff or signed the *Acknowledgement and Acceptance of Service* form. **DO NOT FILE** the *Initial Disclosures* with the Court.

.....

**STEP 6.** There are three options to choose from on this step depending on your situation. Review each option carefully and pick the option that best describes your situation.

**Option A:** If the Respondent filed a *Response* or *Response and Counterclaim* and you both agree on all issues, complete **Option A.**

**Option B:** If the Respondent did not file a *Response* or *Response and Counterclaim*, complete **Option B.**

**Option C:** If the Respondent filed a *Response* or *Response and Counterclaim* and you do NOT agree on all issues, complete **Option C.**

**OPTION A:** If the Respondent filed a *Response* or *Response and Counterclaim* and you both agree on all issues, fill out and file the following documents to finish your case:

- Reply to Counterclaim.** If the Respondent filed a *Response and Counterclaim*, you **must** file a *Reply to Counterclaim* within **20 days** from the date the Respondent filed the *Response and Counterclaim*. You do NOT need to complete this form if the Respondent only filed a *Response*.

- Confidential Financial Affidavit*

- If employed, attach tax returns for prior 2 years; and
- Attach statement of earnings for the current year; **OR**
- If self-employed, attach verified income and expense statements for prior two years; and
- Attach tax returns for prior 2 years.

Additional form that may be needed:

- Affidavit of Imputed Income***. If the Respondent does NOT file a *Confidential Financial Affidavit*, you will need to complete the *Affidavit of Imputed Income* form to show the Court how much money the Respondent makes. You do not need to complete this form if the Respondent filed a *Confidential Financial Affidavit*.
- Order Modifying Child Support and Judgment of Arrears*
- Order for Income Withholding*
- Income Withholding for Support* (or, you can open up a case with your local child support enforcement agency).
- Copies and Envelopes:
  - Take an original and 2 copies of each form to the Clerk for filing.
  - One envelope addressed to you with postage for the Clerk to mail a copy of the *Order* to you.
  - One envelope addressed to the Respondent with postage for the Clerk to mail a copy of the *Order* to the Respondent.
  - Mail a copy of the other forms to the Respondent and keep a copy for your records.
- Additional Forms: The Court may also require these additional forms depending on the county where your case is filed. Ask the Clerk if additional forms are required. If so, provide copies and envelopes for each additional form as follows:
  - Take an original and 2 copies of each additional form to the Clerk for filing.
  - Mail a copy of any additional form filed with the Clerk to the Respondent and keep a copy for your records.
- Hearing. Some Courts require a hearing before the Judge will sign the *Order Modifying Child Support and Judgment of Arrears*. Ask the Clerk if this is required. If so, you will need to request that the Court set a date to hold the hearing.
  - Request for Setting*
  - Order Setting Hearing* (Judge will fill out date and time)
  - Take an envelope addressed to you with postage for the Clerk to mail a copy of the *Order Setting Hearing* to you
  - Take an envelope addressed to the Respondent with postage for the Clerk to mail a copy of the *Order Setting Hearing* to the Respondent.
  - Mail a copy of the *Request for Setting* to the Respondent and keep a copy for your records.

- Attend the Hearing: Inform the Judge that you meet the requirements for a modification of a child support order, that you have calculated child support based on the net income of the parties, and whether or not the children are receiving public benefits. Give the Judge the *Order Modifying Child Support and Judgment of Arrears* you completed.

**Your child support order will be modified when the Judge signs the *Order* and it is filed with the Clerk.**

**OPTION B.** If the Respondent does NOT file a *Response*, fill out and file the following documents to finish your case:

- Application for Entry of Default*
- Affidavit in Support of Default*
- Take a blank *Entry of Default* for the Clerk to sign
- Confidential Financial Affidavit*
  - If employed, attach tax returns for prior 2 years; and
  - Attach statement of earnings for the current year; OR
  - If self-employed, attach verified income and expense statements for prior two years; and
  - Attach tax returns for prior 2 years.
  
- Affidavit of Imputed Income.* You will need to complete the *Affidavit of Imputed Income* form to show the Court how much money the Respondent makes.
  
- Order Modifying Child Support and Judgment of Arrears*
- Order for Income Withholding*
- Income Withholding for Support* (or, you can open up a case with your local child support enforcement agency).
  
- Copies and Envelopes.
  - Take an original and 2 copies of each form to the Clerk for filing
  - Take an envelope addressed to you with postage for the Clerk to mail a copy of the *Order* to you
  - Take an envelope addressed to the Respondent with postage for the Clerk to mail a copy of the *Order* to the Respondent
  - Mail a copy of the other forms to the Respondent and keep a copy for your records.
  
- Additional Forms: The Court may also require additional forms depending on the county where your case is filed. Ask the Clerk if additional forms are required. If so, provide copies and envelopes for each additional form as follows:

- Take an original and 2 copies of each additional form to the Clerk for filing
- Mail a copy of any additional form filed with the Clerk to the Respondent and keep a copy for your records.
  
- Hearing. Some Courts require a hearing before the Judge will sign the *Order Modifying Child Support and Judgment of Arrears*. Ask the Clerk if this is required. If so, you will need to request that the Court set a date to hold the hearing.
  - Request for Setting*
  - Order Setting Hearing* (Judge will fill out date and time)
  - Take an envelope addressed to you with postage for the Clerk to mail a copy of the *Order Setting Hearing* to you
  - Take an envelope addressed to the Respondent with postage for the Clerk to mail a copy of the *Order Setting Hearing* to the Respondent.
  - Mail a copy of the *Request for Setting* to the Respondent and keep a copy for your records.
  
- Attend the Hearing: Inform the Judge that you meet the requirements for a modification of a child support order, that you have calculated child support based on the net income of the parties, and whether or not the children are receiving public benefits. Give the Judge the *Order Modifying Child Support and Judgment of Arrears* you completed.

**Your child support order will be modified when the Judge signs the *Order* and it is filed with the Clerk.**

**OPTION C.** If the Respondent files a *Response* or *Response and Counterclaim*, and you both do NOT agree on all of the issues of your case, fill out and file the following forms and attend the trial to finish your case:

**\*Caution: It is strongly recommended that you hire or find an attorney to represent you at trial, even though you may represent yourself. You proceed at your own risk and will be expected to know the rules and laws.**

- Reply to Counterclaim.* If the Respondent filed a *Response* or *Response and Counterclaim*, you **must** file a *Reply to Counterclaim* within **20 days** from the date the Respondent filed the *Response and Counterclaim*. You do not need to complete this form if the Respondent only filed a *Response*.
  - Take original and two copies to the Clerk for filing
  - Mail copy to the Respondent and keep a copy for your records

- Request a Trial Date.
  - Request for Setting*
  - Order Setting Modification Trial and Requesting Pretrial Statements* (Judge will fill out date and time)
  - Take original and two copies to the Clerk for filing
  - Take an envelope addressed to you with postage for the Clerk to mail a copy of the *Order Setting Modification Trial and Requesting Pretrial Statements* to you
  - Take an envelope addressed to the Respondent with postage for the Clerk to mail a copy of the *Order Setting Modification Trial and Requesting Pretrial Statements* to the Respondent.
  - Mail a copy of the *Request for Setting* to the Respondent and keep a copy for your records.
  
- Pretrial Disclosures and Pretrial Memorandum*
  - File at least **30 days** before the trial date
  - Take original and two copies to the Clerk for filing
  - Mail copy to the Respondent and keep a copy for your records
- No later than 3 working days before the trial, request a court reporter, if desired. You can provide notice to the court reporter by phone or by a written request. 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.
- Attend the Trial: Present your evidence and witnesses.
- Decision by Judge: The Court will tell you at the end of the trial if it will prepare the *Order* or if it wants you or the other party to prepare the *Order* and the terms to include in it. Have a blank *Order* ready to fill out in case the Judge asks you to prepare the *Order*. This way, you can fill it out as he gives his ruling.
- Order Modifying Child Support and Judgment for Arrears* (Unless the Court is preparing this for you)
- Order for Income Withholding*
- Income Withholding for Support* (or, you can open up a case with your local child support enforcement agency).
- Copies and Envelopes.
  - Take an original and 2 copies of each form to the Clerk for filing
  - Take an envelope addressed to you with postage for the Clerk to mail a copy of the *Order* to you
  - Take an envelope addressed to the Respondent with postage for the Clerk to mail a copy of the *Order* to the Respondent
  - Mail a copy of the other forms to the Respondent and keep a copy for your records.

- Additional Forms: The Court may also require additional forms depending on the county where your case is filed. Ask the Clerk if additional forms are required. If so, provide copies and envelopes for each additional form as follows:
  - Take an original and 2 copies of each additional form to the Clerk for filing.
  - Mail a copy of any additional form filed with the Clerk to the Respondent and keep a copy for your records.

**Your child support order will be modified when the Judge signs the *Order* and it is filed with the Clerk.**

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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**PETITION FOR MODIFICATION OF CHILD SUPPORT  
AND JUDGMENT FOR ARREARS**

---

Petitioner respectfully requests this Court modify an order regarding child support, and, if applicable, enter a judgment for arrears/back child support. In support of this petition, the Petitioner states the following:

- Petitioner is the  
 custodial parent; OR  
 non-custodial parent

and is a resident of \_\_\_\_\_ County, State of \_\_\_\_\_.
- A child support order was  
 entered by this Court on \_\_\_\_\_; OR  
(date)  
 entered by the \_\_\_\_\_ Court, \_\_\_\_\_ County,  
State of \_\_\_\_\_.
- This Court made the original child support determination and has exclusive, continuing jurisdiction to modify the order and  the child(ren) OR the  Petitioner OR  Respondent reside in this state. (If this court did not enter the original order or if neither party or the child(ren) continues to reside in this state, seek the advice of an attorney.)
- The most recent child support order concerned the following minor child(ren):

Child's initials: \_\_\_\_\_

Child's year of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

**Child's residence for the past 5 years:**

Dates (From/To)	Address (city and state) where child lived	Name and current address of person(s) child lived with
____/____ /present*		
____/____		
____/____		
____/____		
____/____		
____/____		

Attach a separate sheet if necessary

Child's initials: \_\_\_\_\_

Child's year of birth: \_\_\_\_\_

Present address: \_\_\_\_\_

**Child's residence for the past 5 years:**

Dates (From/To)	Address (city and state) where child lived	Name and current address of person(s) child lived with
____/____ /present*		
____/____		
____/____		
____/____		
____/____		
____/____		

Attach a separate sheet if necessary



The non-custodial parent is required to pay \$ \_\_\_\_\_ per month.

The non-custodial parent is:

In arrears (owes back child support).

The amount of back child support owed is \$ \_\_\_\_\_ through the date of the filing of this Petition.

Attach a copy of the payment record obtained from the Clerk of District Court or the Child Support Enforcement Office.

A judgment should be entered against the non-custodial parent for this amount and any additional amounts which may accrue prior to entry of an order in this action; OR

Current in his/her support obligation and does not owe any back child support; AND

The  custodial  non-custodial parent is required to provide medical insurance for the child(ren). Such insurance  has  has not been provided as ordered; OR

The non-custodial parent was  required  not required to pay for a percentage of medical expenses not covered by insurance. Such medical expenses  have  have not been paid as ordered. If the non-custodial parent has not paid medical expenses as ordered, the total amount owed is \$ \_\_\_\_\_ through the date of the filing of this Petition (attach copies of bills/receipts, if available). A judgment should be entered against the non-custodial parent for this amount and any additional amounts that are owed prior to entry of an order in this action; OR

Neither party has been ordered to provide medical insurance. Petitioner is requesting this Court order  Petitioner OR  Respondent to provide medical insurance and that all medical expenses not covered by insurance be divided in the following manner: \_\_\_\_\_% to be paid by Mother and \_\_\_\_\_% to be paid by Father.

7. Petitioner is seeking a modification of the child support order because:

The child support order has not been entered or modified within the six (6) months prior to the filing of this Petition. Applying the child support guidelines established in Wyo. Stat. § 20-2-304, the child support amount will change by twenty percent (20%) or more per month from the amount of child support required by the existing order; OR

Since the date of the last order, there has been a substantial change of circumstances which warrants modifying the child support and/or medical insurance obligations. The change in circumstances is:

There are fewer children owed support because one of the children is emancipated or has reached the age of majority. ("Age of majority" means a person eighteen (18) years of age, however, for purposes of child support obligations, a parent's legal obligation for the support of his or her children, whether natural or adopted, continues past the age of majority in cases where the children are: (i) mentally or physically disabled and thereby incapable of self support; or (ii) between the age of majority and twenty (20) years and attending high school or an equivalent program as full-time participants.)

The "net" income of one or both of the parents is believed to have substantially changed. ("**Net income**" means income *less* personal income taxes, social security deductions, cost of dependent health care coverage for all dependent children, actual payments being made under preexisting support orders for current support of other children, other court-ordered support obligations currently being paid and mandatory pension deductions. Payments towards child support arrearage shall not be deducted to arrive at net income.)

The financial needs of the child(ren) have increased by reason of age and the cost of living changes.

The obligations and rights of the parties and the child(ren) to provide or receive health care require review and modification.

Other: [Please describe] \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ ; OR

It has been at least three (3) years since a court reviewed the child support and, if appropriate, Petitioner would like the court to adjust the order in accordance with the child support guidelines.

WHEREFORE, Petitioner respectfully requests:

1. The parties be ordered to complete and file *Confidential Financial Affidavits* as provided by Wyo. Stat. § 20-2-308;
2. The Court review and modify the child support order to an amount consistent with the Wyoming Child Support Guidelines;

3. If applicable, the Court review and modify the medical insurance obligation and the allocation of costs not covered by medical insurance;
4. If applicable, the Court enter a judgment for child support arrears and for unpaid medical expenses not covered by medical insurance;
5. Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. For such other and further relief as the Court deems necessary and just.

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

\_\_\_\_\_  
 Signature

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

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

Witness my hand and official seal.

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

My commission expires:

-----Fill in, if applicable-----  
 Pursuant to Rule 102(a)(1)(B) of the Wyoming Uniform Rules of District Court the following attorney has participated in the preparation of this pleading but said attorney is NOT deemed to have entered an appearance in this matter:

\_\_\_\_\_  
 Attorney's Name

Attorney's Address/Telephone:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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. \_\_\_\_\_

**SUMMONS**

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 Petitioner or Petitioner'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)

**RETURN**

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

TO BE USED BY WYOMING SHERIFF, UNDER  
SHERIFF OR DEPUTY

I, \_\_\_\_\_, Sheriff in and for said County of \_\_\_\_\_, in the State aforesaid, do hereby certify that I received the within *Summons*, together with a copy of the *Petition for Modification of Child Support and Judgment for Arrears* (“Petition”) and *Confidential Statement of the Parties for Child Support Order* filed in the above entitled matter, and that I served the same in the County aforesaid on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by delivering a copy of the same, together with a copy of the *Petition* and *Confidential Statement of the Parties for Child Support Order*, to: \_\_\_\_\_

\_\_\_\_\_  
Sheriff

By:

\_\_\_\_\_  
Deputy Sheriff

Sheriff’s fees: Service, \$ \_\_\_\_\_; Return \$ \_\_\_\_\_  
Mileage \$ \_\_\_\_\_; Total \$ \_\_\_\_\_

**AFFIDAVIT OF SERVICE**

STATE OF \_\_\_\_\_ )  
 )ss TO BE USED BY A PERSON OTHER THAN WYOMING  
COUNTY OF \_\_\_\_\_ ) SHERIFF, UNDER SHERIFF OR DEPUTY

\_\_\_\_\_, being first duly sworn, on oath deposes and says that s/he is over 18 years old and is not a party to the foregoing action or interested therein, and that s/he made service of said *Summons* in the County aforesaid on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by delivering a copy of the same, together with a copy of the *Petition for Modification of Child Support and Judgment for Arrears* and *Confidential Statement of the Parties for Child Support Order*, to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

By: \_\_\_\_\_

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

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

My Commission Expires:

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. \_\_\_\_\_

**CONFIDENTIAL**

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**CONFIDENTIAL STATEMENT FOR CHILD SUPPORT ORDER**

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Pursuant to the requirements of Wyo. Stat. §20-2-309(b), the following information is confidential and may only be accessed by the parties, their attorneys, or the Department of Family Services to the extent necessary to enforce the Child Support Enforcement Act and the Uniform Interstate Family Support Act. Other persons or entities may examine this statement only if permitted by court order.

1. Information for each parent:

**Name of Petitioner:** \_\_\_\_\_  
Address: \_\_\_\_\_

\_\_\_\_\_  
Petitioner's Social Security Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_  
Petitioner's Employer: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
\_\_\_\_\_

**Name of Respondent:** \_\_\_\_\_  
Address: \_\_\_\_\_

\_\_\_\_\_  
Respondent's Social Security Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_  
Respondent's Employer: \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
\_\_\_\_\_

2. Information for each child for whom child support has been ordered in this case:

**Child's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Child's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Child's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Child's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Child's Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Add additional sheets of paper if needed to provide information for more children.

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

\_\_\_\_\_  
Signature

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

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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**ACKNOWLEDGEMENT AND ACCEPTANCE OF SERVICE**

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I, \_\_\_\_\_, hereby acknowledge receipt of a copy of the  
(Print Respondent's Name)  
*Summons, Petition for Modification of Child Support and Judgment of Arrears, 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:

*Acknowledgement and Acceptance of Service*  
*Effective: July 1, 2023.*  
*Page 1 of 2*

**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

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

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

Petitioner: \_\_\_\_\_, )  
(Print name of person filing) )

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

vs. )

Respondent: \_\_\_\_\_ )  
(Spouse) (Print name)

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### INITIAL DISCLOSURES

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The following initial disclosures are submitted by the Petitioner pursuant to Wyoming Rule of Civil Procedure 26(a)(1.2)(A). This information is required in all child support proceedings to the extent that the information pertains to a particular claim or defense in the action. This information must be made available to the opposing party's attorney (or the opposing party if he or she does not have an attorney) within thirty (30) days after the Respondent's *Response to the Petition for Modification of Child Support and Judgment for Arrears* is required to be served. **For any of the following disclosures that do not pertain to you, write "not applicable" on the appropriate schedule.**

1. A schedule of financial assets owned individually or jointly, such as savings or checking accounts, stocks, bonds, cash or cash equivalents, including the name and address of the depository, the date such account was established, the type of account, the account number, the current value of the account, and whether the account is acknowledged to be a marital asset or asserted to be a non-marital asset and, if asserted to be a non-marital asset, an explanation of the legal and factual basis for such assertion. (See attached **Schedule of Financial Assets.**)

2. A schedule of non-financial assets, such as personal or real property (i.e. house, land, vehicles, household items, etc.) owned individually or jointly, including the purchase price and the date of purchase or acquiring the property, the present market value, any indebtedness

relating to such asset, the state of record ownership, the current location of the asset, whether purchased from marital assets or obtained by gift or inheritance, and whether acknowledged to be a marital asset or asserted to be a non-marital asset and, if asserted to be a non-marital asset, an explanation of the legal and factual basis for such assertion. (See attached **Schedule of Non-Financial Assets.**)

3. A schedule of all debts owed individually or jointly, identifying the date any obligation was incurred, the spouse in whose name the debt was incurred, the present amount of all debts and monthly payments, the use to which the money was put which caused the debt to arise, identification of any asset which serves as security for such debt, and an acknowledgement of whether each debt is a marital or non-marital debt, and if asserted to be a non-marital debt, an explanation of the legal and factual basis for such assertion. (See attached **Schedule of Debts.**)

4. A schedule of safe deposit boxes, including the name and address of the institution where the box is located, the box number, the name and address of the individual(s) who has access to the box, an inventory of the contents, and the value of the assets located therein. (See attached **Schedule of Safety Deposit Boxes.**)

5. A schedule of employment, including the name and address of your employer; gross monthly wage; payroll deduction(s), specifically identifying the type and amount; the amount of other benefits including transportation, employer contributions to health care, and employer contributions to retirement accounts; and outstanding bonuses. (See attached **Schedule of Employment.**)

6. A schedule of all other sources of income, including the name and address of the source and the amount and date the income was received. (See attached **Schedule of Other Income.**)

7. A schedule of all retirement accounts or benefits, including the name and address of the institution holding the accounts or benefits, the present value if readily ascertainable, the initial date of any account, the expected payment upon retirement and the specific retirement date, and the value of the account at the date of the marriage if the account existed prior to marriage. (See attached **Schedule of Retirement Accounts or Benefits.**)

8. If seeking custody, or a change in custody, set forth the facts believed to support your claim of superior entitlement to custody. In addition, as to a change of custody, set forth the facts comprising a substantial change in circumstances and disclose any supporting documentation. (See attached **Schedule of Custody**.)

9. **NOTE: *Supplementation of disclosures and responses.*** Wyoming Rules of Civil Procedure 26(e)(1): A party who has made a disclosure or responded to a request for discovery with a disclosure or response is under a duty to supplement or correct the disclosure or response to include information thereafter acquired, if ordered by the court or in the following circumstances:

**A party is under a duty to supplement at appropriate intervals, its disclosures if the party learns that in some material respect the information disclosed is incomplete or incorrect and if the additional or corrective information has not otherwise been made known to the other parties during the discovery process or in writing.**

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

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

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) 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

## A NOTE ABOUT MARITAL vs. NON-MARITAL ASSETS AND DEBTS

In the following tables you will be asked to distinguish marital property/debt from non-marital (separate) property/debt. Marital property/debt will be divided between you and your spouse as part of the divorce; non-marital property/debt usually will not be divided (depending on the situation).

The general rule is that marital property and debt is any property or debt acquired during the marriage for the benefit of the marriage, regardless of who paid for it or whose name is on it. However, just because a party acquired property before marriage does not necessarily mean that it won't be considered marital property. A spouse's premarital separate property can become marital when a married couple demonstrates an intent, through their words or actions during marriage, to treat one spouse's separate property as marital property. Gifts and inheritances are generally separate property, although gifts for the benefit of the marriage, such as a dishwasher, may be considered marital property.

"During the marriage" generally means from the time of marriage until the time of separation.

People often dispute what property/debt is marital or how long the marriage lasted. When this happens, you are urged to consult with an attorney to learn about the various legal arguments that may be available to you.

If you want to read more about divorce and property division, you can review that information here, <http://www.legalhelpwy.org/>.

**SCHEDULE-A  
Financial Assets**

Not Applicable

<b>Type of Account</b> Checking, Savings, Stocks, Bonds, Cash, Cash Equivalents, other Financial Assets	<b>Name and Address of Depository</b> List bank, credit union, brokerage or other location where the financial asset is held.	<b>Date Account Opened</b>	<b>Present Market Value</b>	<b>Last 4 digits of Account Number</b>	<b>Record Ownership</b> (Petitioner, Respondent, Jointly Owned, Other-describe)	<b>Source of Funds</b> (Marital assets, Gift, Inheritance, Separate assets, Before this marriage, Other-describe)	<b>Asserted as Marital or Non- Marital Asset?</b> **If not a marital asset, an explanation of legal and factual basis for such assertion is required. Please attach additional sheets of paper if more space is needed.
a.							
b.							
c.							
d.							
e.							
f.							
g.							

Attach additional sheets of paper if needed

**SCHEDULE-B**

**Non-Financial Assets**

Not Applicable

Description of Asset	Purchase Price	Date Acquired/ Purchased	Present Market Value	Amount of debt related to asset	Record Ownership (Petitioner, Respondent, Jointly Owned, Other-describe)	Where is asset recorded or registered <u>and</u> where is it currently located (County & State)	How acquired: (Marital assets, Gift, Inheritance, Separate assets, or Before this marriage)	Asserted as Marital or Non-Marital Asset?  **If not a marital asset, an explanation of legal and factual basis for such assertion is required. Please attach additional sheets of paper if more space is needed.
List Personal Property (i.e., household furnishings, jewelry, antiques, guns, collectables, etc.)								
a.								
b.								
c.								
d.								
e.								
f.								
g.								
h.								
i.								
j.								
k.								
l.								
m.								

Attach additional sheets of paper if needed

Not Applicable

**Non-Financial Assets Cont.**

Description of Asset	Purchase Price	Date Acquired/ Purchased	Present Market Value	Amount of debt related to asset	Record Ownership (Petitioner, Respondent, Jointly Owned, Other-describe)	Where is asset recorded or registered <u>and</u> where is it currently located (County & State)	How acquired: (Marital assets, Gift, Inheritance, Separate assets, or Before this marriage)	Asserted as Marital or Non-Marital Asset?  **If not a marital asset, an explanation of legal and factual basis for such assertion is required. Please attach additional sheets of paper if more space is needed.
List All Vehicles by Year, Model & VIN a.								
b.								
c.								
d.								
Real Property (house, land, etc.) (Describe) a.								
b.								
c.								
d.								

Attach additional sheets of paper if needed

Not Applicable

**Non-Financial Assets Cont.**

Description of Asset	Purchase Price	Date Acquired/ Purchased	Present Market Value	Amount of debt related to asset	Record Ownership (Petitioner, Respondent, Jointly Owned, Other-describe)	Where is asset recorded or registered <u>and</u> where is it currently located (County & State)	How acquired: (Marital assets, Gift, Inheritance, Separate assets, or Before this marriage)	Asserted as Marital or Non-Marital Asset?  **If not a marital asset, an explanation of legal and factual basis for such assertion is required. Please attach additional sheets of paper if more space is needed.
Interest in any business (Describe) a.								
b.								
c.								
Any other non-financial assets: (Describe) a.								
b.								
c.								
d.								
e.								

Attach additional sheets of paper if needed

**SCHEDULE-C**

Not Applicable

**Debts (Incurred Individually or Jointly)**

Name of Creditor and Last 4 Digits of Account #	Date Debt Was Incurred	Who Incurred the debt? (Petitioner, Respondent, Jointly Owned, Other-describe)	Current Balance of Debt	Monthly Payment	What You Received For Debt or Use to Which Money was Put	Asset serving as security for Debt	Asserted as Marital or Non-Marital Debt? <small>**If not a marital debt, an explanation of legal and factual basis for such assertion is required. Please attach additional sheets of paper if more space is needed.</small>
a.  Acct. #:							
b.  Acct. #:							
c.  Acct. #:							
d.  Acct. #:							
e.  Acct. #:							
f.  Acct. #:							
g.  Acct. #:							
h.  Acct. #:							
i.  Acct. #:							
j.  Acct. #:							

Attach additional sheets of paper if needed

**SCHEDULE-D**  
**Safe Deposit Boxes**

Not Applicable

Name and Address of Institution where box is located	Box Number	All Name(s) to whom the box is registered	Names and Addresses of All Individuals Who Have Access to the Box	Inventory of Contents	Value of Contents
a.					
b.					
c.					

Attach additional sheets of paper if needed

**SCHEDULE-E**

**Employment/ Self-Employment**

Not Applicable

Employer's Name and Address	Gross Monthly Wage and Payroll Deductions (Identify Type and Amount)	Other Benefits and Amount Received (including transportation, employer contributions to health care, and employer contributions to retirement account)	Outstanding Bonuses (owed to you but not yet received) List <b>Amount</b> and <b>Due Date</b>
a.	Gross:  Fed Tax: FICA (Social Security): Medicare: Children's Health Ins. Premiums:  Total Deductions: Net:		Amount:    Due Date:
b.	Gross:  Fed Tax: FICA (Social Security): Medicare: Children's Health Ins. Premiums:  Total Deductions: Net:		Amount:    Due Date:
c.	Gross:  Fed Tax: FICA (Social Security): Medicare: Children's Health Ins. Premiums:  Total Deductions: Net:		Amount:    Due Date:

Attach additional sheets of paper if needed

SCHEDULE-F

Not Applicable

**Other Income** (Not Previously Indicated Herein)

Name and Address of Source of Other Income:	Amount Received	Date Received
1. Disability (Indicate type, i.e., Temporary total, permanent partial, permanent total, etc)		
2. Unemployment		
3. Worker's Compensation		
4. Retirement		
5. Any Other Payments Made By Any Payor (describe)		

Attach additional sheets of paper if needed

**SCHEDULE-G**

**Retirement Accounts or Benefits**

(Pensions, Profit Sharing, IRA's, 401K's, Retirement Plans, etc.)

Not Applicable

Name and Address of Institution, Carrier, or Plan Administrator holding the account or benefit	Who owns the plan? Petitioner or Respondent	Last 4 Digits of Account or ID Number	Type of Plan	Date Plan Acquired	Value of Account on Date of Marriage	Present Value	Loans Against Plan	Expected Date of Retirement and Expected Payment Amount	Asserted as Marital or Non-Marital Asset? <small>**If not a marital asset, an explanation of legal and factual basis for such assertion is required. Please attach additional sheets of paper if more space is needed.</small>
1.								Date:  Payment:	
2.								Date:  Payment:	
3.								Date:  Payment:	
4.								Date:  Payment:	
5.								Date:  Payment:	

Attach additional sheets of paper if needed

SCHEDULE-H

**Custody**

Not Applicable

1. If you are seeking custody, set forth the facts supporting your claim to superior entitlement to custody:

A. I have been the primary caretaker of the child(ren) as follows:

B. I have a good quality of relationship with the child(ren) as follows:

C. I have the ability to take care of the child(ren) as follows:

D. I am the more fit and competent parent to have custody as follows:

E. I am willing to support my child(ren) maintaining a relationship with both parents as follows:

F. I have the physical ability to care for the child(ren) as follows:

G. Other

Attach additional sheets of paper if needed

STATE OF WYOMING ) IN THE DISTRICT COURT  
 ) ss  
COUNTY OF \_\_\_\_\_ ) \_\_\_\_\_ JUDICIAL DISTRICT

Petitioner: \_\_\_\_\_, ) Civil Action Case No. \_\_\_\_\_  
(Print name of person filing) )  
 )  
vs. ) **CONFIDENTIAL**  
 )  
Respondent: \_\_\_\_\_ )  
(Print name of other parent) )

**CONFIDENTIAL  
FINANCIAL AFFIDAVIT  
W.S. §20-2-308**

A financial affidavit must be completed by each parent. You must attach copies of your tax returns and W-2 forms for the most recent two years and a copy of the total amount of wages you have earned so far this year. **Parents who are self-employed must supply verified income and expense statements from their business for the two most recent years.**

**THE UNDERSIGNED**, \_\_\_\_\_, hereby swears or affirms,  
(Print Your Name)  
under penalty of perjury, that the following answers are correct and complete.

**PERSONAL INFORMATION**

- Your Name: (First, Middle, Last) \_\_\_\_\_  
Gender:  Male  Female
- Your Present Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
How long have you resided at this location? \_\_\_\_\_  
Your Mailing Address (if different from above) \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_
- Your Home Phone Number: (\_\_\_\_) \_\_\_\_\_  
Your Cell Phone Number: (\_\_\_\_) \_\_\_\_\_

A Message Phone Number: (\_\_\_\_) \_\_\_\_\_

4. Your Social Security Number is: \_\_\_\_\_

5. Your Date of Birth is: \_\_\_\_\_

6. Your Education is: \_\_\_\_\_ years of high school; \_\_\_\_\_ years of college;  
\_\_\_\_\_ years of trade school; \_\_\_\_\_ years other (list training) \_\_\_\_\_

7. List your degree(s) or certificate(s): \_\_\_\_\_

8. List all child(ren) involved in **this matter**:

Child's Name	Sex	Birth Date	Social Security No.	Does this child live with you?
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No

Additional sheets of paper are attached (if needed)

9. List **YOUR** minor children (not named above) who **live with you**:

Child's Name	Birth Date	Social Security No.

Additional sheets of paper are attached (if needed)

10. List **YOUR** minor children (not named above) who do **not live with you** but for whom **YOU** are court-ordered to pay child support:

Child's Name	Birth Date	Social Security No.
Court and Date of Order	Support/Month	Arrears (Amount Past Due)
Child's Name	Birth Date	Social Security No.
Court and Date of Order	Support/Month	Arrears (Amount Past Due)
Child's Name	Birth Date	Social Security No.
Court and Date of Order	Support/Month	Arrears (Amount Past Due)
Child's Name	Birth Date	Social Security No.
Court and Date of Order	Support/Month	Arrears (Amount Past Due)

Additional sheets of paper are attached (if needed)

11. Do you owe back child support (arrears) in this case? If so, how much? \$\_\_\_\_\_.

12. List any income-qualified state or federal benefits that your child(ren) receive (POWER, Medicaid, Kid Care, Title 19, General Assistance, Food Stamps, Supplemental Security Income, etc.):

CHILD'S NAME	BIRTH DATE	STATE	TYPE OF BENEFIT

Additional sheets of paper are attached (if needed)

**INCOME & EXPENSE INFORMATION**

13. Are you currently:  Employed  Self-Employed  Unemployed

If you are employed, please provide the following:

**Job No. 1:**

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Employer's Phone: \_\_\_\_\_

Your Occupation: \_\_\_\_\_

Your Hourly Wage or Monthly Salary: \_\_\_\_\_

**Job No. 2:**

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Employer's Phone: \_\_\_\_\_

Your Occupation: \_\_\_\_\_

Your Hourly Wage or Monthly Salary: \_\_\_\_\_

**Job No. 3:**

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Employer's Phone: \_\_\_\_\_

Your Occupation: \_\_\_\_\_

Your Hourly Wage or Monthly Salary: \_\_\_\_\_

Add additional sheets of paper if necessary to list additional jobs.

How many hours do you work each week?

<b>Job No. 1:</b>	<b>Job No. 2:</b>	<b>Job No. 3</b>
Regular _____	Regular _____	Regular _____
Overtime _____	Overtime _____	Overtime _____
Total _____	Total _____	Total _____

How often do you receive overtime compensation? \_\_\_\_\_

How often are you paid:

<b>Job No. 1:</b>	<b>Job No. 2:</b>	<b>Job No. 3</b>
<input type="checkbox"/> weekly	<input type="checkbox"/> weekly	<input type="checkbox"/> weekly
<input type="checkbox"/> every two weeks	<input type="checkbox"/> every two weeks	<input type="checkbox"/> every two weeks
<input type="checkbox"/> twice per month	<input type="checkbox"/> twice per month	<input type="checkbox"/> twice per month
<input type="checkbox"/> monthly	<input type="checkbox"/> monthly	<input type="checkbox"/> monthly
<input type="checkbox"/> annually	<input type="checkbox"/> annually	<input type="checkbox"/> annually

Date of your last salary increase or decrease: \_\_\_\_\_

14. List all income you have received for the last 12 months:

Income Source	Monthly Amount	Income Source	Monthly Amount
Gross Wages**	Job 1 - \$ _____ Job 2 - \$ _____ Job 3 - \$ _____	Annuity	\$ _____
Unemployment	\$ _____	Spousal Support	\$ _____
Workers' Compensation	\$ _____	Contract Receipts	\$ _____
Social Security Benefits (Excluding SSI)	\$ _____	Rental Income	\$ _____
Retirement	\$ _____	Fringe Benefits/Bonuses	\$ _____
Interest/Dividend Income	\$ _____	Profit (Loss) from Self-Employment	\$ _____
Reimbursements	\$ _____	Other _____	\$ _____
Veterans' Disability	\$ _____	Other _____	\$ _____

\*\*Gross Wage - Monthly amounts are calculated by multiplying weekly amount by 52 and dividing by 12; multiplying bi-weekly (every two weeks) amounts by 26 and dividing by 12; and multiplying semi-monthly (i.e., paid on the 1<sup>st</sup> and 15<sup>th</sup>) amounts by 24 and dividing by 12.

Additional sheets of paper are attached (if needed)

15. **IF YOU ARE EMPLOYED:** Please complete list and calculate the following:

- A. **Gross income:** \$\_\_\_\_\_ per month  
(Amount of income from all sources before deductions)
- B. Federal Income Tax: \$\_\_\_\_\_ per month
- C. State Income Tax: \$\_\_\_\_\_ per month
- D. Social Security Tax: \$\_\_\_\_\_ per month
- E. Medicare Tax: \$\_\_\_\_\_ per month
- F. Mandatory Retirement/Pension: \$\_\_\_\_\_ per month
- G. Premium Paid for Child(ren)'s Health Insurance: \$\_\_\_\_\_ per month
- H. Current Child Support Paid for Other Children: \$\_\_\_\_\_ per month
- I. **Total Mandatory Deductions:** \$\_\_\_\_\_ per month
- J. **Net Income** (line A minus line I): \$\_\_\_\_\_ per month

K. Income Tax Filing Status: \_\_\_\_\_

L. Number of Dependents Claimed for Tax Purposes: \_\_\_\_\_

Please provide copies of pay-stubs for all payroll deductions.

Attach copies of your tax returns and W-2 forms for the most recent two years and a copy of a cumulative earning statement(s) for the current year

16. **IF YOU ARE SELF-EMPLOYED:** Please list the following:

- A. **Gross income :** \$\_\_\_\_\_ per month  
\*amount of income from all sources before deductions
- B. Federal Income Tax: \$\_\_\_\_\_ per month
- C. State Income Tax: \$\_\_\_\_\_ per month
- D. Social Security Tax: \$\_\_\_\_\_ per month
- E. Medicare Tax: \$\_\_\_\_\_ per month
- F. Unreimbursed Business Expenses: \$\_\_\_\_\_ per month
- G. Premium Paid for Child(ren)'s Health Insurance: \$\_\_\_\_\_ per month
- H. Current Child Support Paid for Other Children: \$\_\_\_\_\_ per month
- I. **Total Mandatory Deductions:** \$\_\_\_\_\_ per month
- J. **Net Income** (line A minus line I): \$\_\_\_\_\_ per month

K. Income Tax Filing Status: \_\_\_\_\_

L. Number of Dependents Claimed for Tax Purposes: \_\_\_\_\_

**Attach verified income and expense statements from your business, copies of your personal and business tax returns, and 1099 forms for the most recent two years.**

17. List your work experience for the last three years:

COMPANY AND LOCATION	DATES FROM - TO	JOB DESCRIPTION/TITLE	SALARY OR WAGE	REASON YOU LEFT

Additional sheets of paper are attached (if needed)

18. Has anyone been ordered to provide health insurance for the child(ren) involved in this case, or is there any other medical provision in an existing court order?  YES  NO

If yes, please list who is ordered to provide insurance: \_\_\_\_\_

Are the children currently covered by insurance?  YES  NO

If yes, please list who is providing the insurance: \_\_\_\_\_

**If you are currently providing insurance for your children, you must provide current written proof from your insurance carrier verifying the names of the actual person(s) covered under your policy.**

Is health insurance available for the minor child(ren) through your employment?

YES  NO

If yes, how much is the monthly premium to cover **ONLY** the minor child(ren) on the policy?

\$ \_\_\_\_\_

19. **Attach the following to this Confidential Financial Affidavit:**

**If Employed:**

- Copies of my last two years income tax returns;
- Copies of my W-2 Forms for the last two years; and
- Copies of statements of earnings from each of my employers showing cumulative pay for this year.



**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (date) the original of this Confidential Financial Affidavit 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 Respondent/Respondent's Attorney's Name and Address)

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

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. \_\_\_\_\_

**CONFIDENTIAL**

---

**AFFIDAVIT OF IMPUTED INCOME**

---

**(Only use this form if you are unable to get the other party to complete a Confidential Financial Affidavit.)**

I, \_\_\_\_\_, of lawful age, first being duly sworn upon my  
(print name)  
oath, depose and state as follows:

1. I am the  Petitioner OR  Respondent in the above-captioned matter.
2. I am not able to get a *Confidential Financial Affidavit* from the other party because: \_\_\_\_\_.
3. The other party has certifications, degrees, education or training relevant to his/her employability as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Explain, to the best of your knowledge, the other party's work history or other sources of income for the previous two years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. His/her income for this year is unknown, as she/he has not provided financial information and has failed, neglected or otherwise refused to file a *Confidential Financial Affidavit*.
6. I  do  do not have copies of the last two year's income tax returns showing the amount earned by  Petitioner OR  Respondent. ATTACH

ANY TAX RETURNS, W-4s, CHECK STUBS OR OTHER INFORMATION ABOUT THE OTHER PARTY'S INCOME TO THIS DOCUMENT.

If you have information about the other parent's previous or current employment by area and occupation, you may be able to get information regarding wages by visiting the U.S. Department of Labor Bureau of Labor Statistics website for wage information by area and occupation <http://www.bls.gov/bls/blswage.htm>. Attach any relevant documentation to this Affidavit.

7.  Petitioner's  Respondent's income is based on him/her being paid:

- \_\_\_\_\_ weekly
- \_\_\_\_\_ every two weeks
- \_\_\_\_\_ twice per month (e.g. 1<sup>st</sup> and 15<sup>th</sup> of every month)
- \_\_\_\_\_ monthly
- \_\_\_\_\_ annually

Convert annual, bi-weekly, bi-monthly, and weekly amounts to *monthly* amounts below.

**\*\* Gross income (includes tips, commission and bonuses). Monthly amounts are calculated by multiplying weekly amount by 52 and dividing by 12; multiplying bi-weekly amounts by 26 and dividing by 12; and multiplying semi-monthly amounts by 24 and dividing by 12; annually by dividing by 12. If only the "gross income" is known, multiply that number by .25 (or other number if instructed by Court) and then subtract that amount from the gross to arrive at the net monthly income. If the other party has a history of only working for minimum wage or less, and is capable, to your knowledge of working 40 hours/week, the court may impute his/her income at \$1,141.25 net monthly for a noncustodial parent and \$1,185.67 net monthly for a custodial parent. You may call your local child support enforcement office for more information on imputing a custodial or non-custodial parent's wage. Federal minimum wage is \$7.25/hour as of July 1, 2012.**

8.  Petitioner's OR  Respondent's estimated gross income (before deductions) is: \$\_\_\_\_\_ *per month*, to the best of my information and belief.

"Income" means any form of payment or return in money or in kind to an individual, regardless of source. Income includes, but is not limited to wages, earnings, salary, commission, compensation as an independent contractor, temporary total disability, permanent partial disability and permanent total disability worker's compensation payments, unemployment compensation, disability, annuity and retirement benefits, and any other payments made by any payor, but shall not include any earnings derived from overtime work unless the court, after considering all overtime earnings derived in the preceding twenty-four (24) month period, determines the overtime earnings can reasonably be expected to continue on a consistent basis. In determining income, all reasonable unreimbursed legitimate business expenses shall be deducted. Means tested sources of income such as Pell grants, aid under the personal opportunities with employment responsibilities (POWER) program, food stamps and supplemental security income (SSI) shall not be considered as income. Gross income also means potential income of parents who are voluntarily unemployed or underemployed.



**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/Other Party's Attorney's Name and Address)

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

**DO NOT FILE WITH CONFIDENTIAL FINANCIAL AFFIDAVIT.**  
**FOR COMPUTATION PURPOSES ONLY.**  
**EFFECTIVE JULY 1, 2023.**

§ 20-2-304. Presumptive child support:

(i) One (1) child:

Net Monthly Income of Both Parents	Percentage of Income Allocated for One Child	Base Support Plus Marginal Percentage
\$1,000.00	23.0	\$230.00 + 23.0% over \$1,000.00
\$2,000.00	23.0	\$461.00 + 23.0% over \$2,000.00
\$3,200.00	23.0	\$737.00 + 20.1% over \$3,200.00
\$4,000.00	22.5	\$898.00 + 13.4% over \$4,000.00
\$4,500.00	21.4	\$965.00 + 11.8% over \$4,500.00
\$8,000.00	17.2	\$1,379.00 + 11.1% over \$8,000.00
\$15,000.00	14.4	\$2,157.00 + 10.3% of anything over \$15,000.00

(ii) Two (2) children:

Net Monthly Income of Both Parents	Percentage of Income Allocated for Two Children	Base Support Plus Marginal Percentage
\$1,000.00	35.1	\$351.00 + 35.1% over \$1,000.00
\$2,000.00	35.1	\$702.00 + 33.9% over \$2,000.00
\$3,200.00	34.6	\$1,108.00 + 31.0% over \$3,200.00
\$4,000.00	33.9	\$1,356.00 + 19.6% over \$4,000.00
\$4,500.00	32.3	\$1,454.00 + 17.0% over \$4,500.00
\$8,000.00	25.6	\$2,048.00 + 16.0% over \$8,000.00
\$15,000.00	21.1	\$3,171.00 + 15.3% of anything over \$15,000.00

(iii) Three (3) children:

Net Monthly Income of Both Parents	Percentage of Income Allocated for Three Children	Base Support Plus Marginal Percentage
\$1,000.00	42.4	\$424.00 + 42.4% over \$1,000.00
\$2,000.00	42.4	\$848.00 + 40.4% over \$2,000.00
\$3,200.00	41.7	\$1,334.00 + 36.5% over \$3,200.00
\$4,000.00	40.6	\$1,626.00 + 22.8% over \$4,000.00
\$4,500.00	38.7	\$1,740.00 + 19.2% over \$4,500.00
\$8,000.00	30.2	\$2,412.00 + 18.4% over \$8,000.00
\$15,000.00	24.7	\$3,698.00 + 18.1% of anything over \$15,000.00

(iv) Four (4) children:

Net Monthly Income of Both Parents	Percentage of Income Allocated for Four Children	Base Support Plus Marginal Percentage
\$1,000.00	47.4	\$474.00 + 47.4% over \$1,000.00
\$2,000.00	47.4	\$948.00 + 45.2% over \$2,000.00
\$3,200.00	46.6	\$1,490.00 + 40.8% over \$3,200.00
\$4,000.00	45.4	\$1,816.00 + 25.5% over \$4,000.00
\$4,500.00	43.2	\$1,943.00 + 21.5% over \$4,500.00
\$8,000.00	33.7	\$2,694.00 + 20.5% over \$8,000.00
\$15,000.00	27.5	\$4,130.00 + 20.2% of anything over \$15,000.00

(v) Five (5) or more children:

Net Monthly Income of Both Parents	Percentage of Income Allocated for Five Children	Base Support Plus Marginal Percentage
\$1,000.00	52.1	\$521.00 + 52.1% over \$1,000.00
\$2,000.00	52.1	\$1,042.00 + 49.7% over \$2,000.00
\$3,200.00	51.2	\$1,639.00 + 44.8% over \$3,200.00
\$4,000.00	49.9	\$1,997.00 + 28.0% over \$4,000.00
\$4,500.00	47.5	\$2,137.00 + 23.6% over \$4,500.00
\$8,000.00	37.0	\$2,964.00 + 22.6% over \$8,000.00
\$15,000.00	30.3	\$4,543.00 + 22.2% of anything over \$15,000.00

In accordance with W.S. § 20-2-304(f), if the difference between the noncustodial parent’s net income and the self-support reserve is less than the support obligation as calculated from the tables above, the support obligation shall be set using the difference between the noncustodial parent’s net income and the self-support reserve. “Self-support reserve” means the current poverty line for one (1) person as specified by the poverty guidelines updated periodically in the Federal Register by the United States department of health and human services under the authority of 42 U.S.C. 9902(2). See Table D on page 3.

**DO NOT FILE WITH CONFIDENTIAL FINANCIAL AFFIDAVIT.**  
**FOR COMPUTATION PURPOSES ONLY. EFFECTIVE JULY 1, 2023.**

**Depending on the details of the custody arrangement, the parties may need to complete more than one table to calculate child support. Please read through the instructions for each table carefully. A secure child support calculator can also be found at: <https://childsupport.wyoming.gov/calculator/index.html>.**

**CHILD SUPPORT COMPUTATION FORM**

<b>A. COMPUTATION OF BASIC SUPPORT OBLIGATIONS: WYO. STAT. §20-2-304</b>		
1.	Plaintiff's/Petitioner's Net Monthly Income:	\$
2.	Defendant's/Respondent's Net Monthly Income:	\$
3.	Combined Net Monthly Income:	\$
4.	Using the support tables for presumptive support at Wyo. Stat. § 20-2-304 (a), the basic joint support obligation of the parents =	\$
5.	Plaintiff's/Petitioner's Proportionate Share: Line 1/Line 3 x Line 4 =	\$
6.	Defendant's/Respondent's Proportionate Share: Line 2/Line 3 x Line 4 =	\$
7.	<b>MONTHLY SUPPORT DUE FROM NONCUSTODIAL PARENT</b> (Amount from Line 5 or Line 6) =	\$

NOTE: If the custody of the children is shared or split as defined under Wyo. Stat. § 20-2-304 (c) and (d) other formulas apply. If "split" (meaning each parent has physical custody of at least one (1) child), the amount shall be allocated to each parent based upon the number of those children in the physical custody of that parent (see Table C on page 3). If "shared" (meaning each parent has actual overnight custody of the children for a certain percentage of time), the amount will be allocated based on the percentage of time (Table B below).

<b>B. SHARED PHYSICAL CUSTODY:</b> Wyo. Stat. § 20-2-304 (c) provides for special support computation of support when each parent keeps the children overnight for more than twenty-five percent (25%) of the year <i>and</i> both parents contribute substantially to the expenses of the children <i>in addition to</i> the payment of child support. If this is the custodial arrangement, support may be computed as follows assuming all other statutory provisions apply.				
8.	a) Percent of year children will reside overnight with Plaintiff/Petitioner	_____ %	b) percent of year children will reside overnight with Defendant/Respondent	_____ %
9.	Plaintiff's/Petitioner's support obligation: Line 5 x 150% x Line 8b		\$ _____	
10.	Defendant's/Respondent's support obligation: Line 6 x 150% x Line 8a		\$ _____	
11.	MONTHLY SUPPORT DUE: The difference between lines 9 and 10 represents the net monthly support due from the parent having the greater support obligation.		\$ _____	

<b>C. SPLIT CUSTODY:</b> Wyo. Stat. §20-2-304 (d) provides for special computations of support when each parent has physical custody of at least one (1) child. In such cases the support should be computed as follows:		
12.	Shared responsibility child support per child: Line 4 ÷ Total children of parents.	\$ _____
13.	Plaintiff's/Petitioner's support obligation for children in custody of Defendant/Respondent: Line 1/Line 3 x Number of children with Defendant/Respondent x Line 12	\$ _____
14.	Defendant/Respondent's support obligation for children in custody of Plaintiff/Petitioner: Line 2/Line 3 x Number of children with Plaintiff/Petitioner x Line 12	\$ _____
15.	MONTHLY SUPPORT DUE: The difference between lines 13 and 14 represents the net monthly support due from the parent having the greater support obligation.	\$ _____

<b>D. SELF-SUPPORT RESERVE COMPUTATION:</b> Wyo. Stat. § 20-2-304 (f) provides for special computation of support when the difference between the obligor's net income and the self-support reserve is less than the support obligation as calculated using the support tables for presumptive support on page 1. In such cases, the support should be computed as follows:		
16.	Net income of the obligor or parent paying support	\$ _____
17.	Self-Support Reserve: Find the current "self-support reserve" by going to the Family Law Forms at <a href="http://www.courts.state.wy.us/legal-assistances-and-forms/court-self-help-forms/">www.courts.state.wy.us/legal-assistances-and-forms/court-self-help-forms/</a> . Enter the number provided.	\$ _____
18.	Subtract line 17 from line 16.	\$ _____
19.	If the amount on line 18 is <u>less</u> than the child support due as calculated on line 7 of Table A, line 11 of Table B, or line 15 of Table C, then line 18 is the <b>monthly child support obligation</b> . Enter the amount here.  If the amount on line 18 is <u>more</u> than line 7 of Table A, line 11 of Table B, or line 15 of Table C, then skip to line 20.	\$ _____
20.	If the amount on line 18 is <u>more</u> than the child support due as calculated on line 7 of Table A, line 11 of Table B, or line 15 of Table C, then the child support calculated on line 7 of Table A, line 11 of Table B, or line 15 of Table C is the <b>monthly child support obligation</b> . Enter the amount here.	\$ _____

**DO NOT FILE WITH CONFIDENTIAL FINANCIAL AFFIDAVIT. FOR COMPUTATION PURPOSES ONLY.**

## NET INCOME CALCULATION WORKSHEET FOR CHILD SUPPORT

### A. For Employed Persons:

1. **Gross income\*** (amount before any deductions): \$ \_\_\_\_\_ per month
2. Federal Income Tax: \$ \_\_\_\_\_ per month
3. State Income Tax: \$ \_\_\_\_\_ per month
4. Social Security Tax (FICA): \$ \_\_\_\_\_ per month
5. Medicare Tax: \$ \_\_\_\_\_ per month
6. Mandatory Retirement/Pension: \$ \_\_\_\_\_ per month
7. Premium Paid for Child(ren)'s Health Insurance: \$ \_\_\_\_\_ per month
8. Child Support Actually Paid for Other Children: \$ \_\_\_\_\_ per month  
(Do not include payments towards back child support)
- Total Mandatory Deductions:** \$ \_\_\_\_\_ per month
  
9. **Net Income** (line 1 minus lines 2- 8): \$ \_\_\_\_\_ per month

### B. For Self-Employed Persons:

1. **Gross income\*** (amount before any deductions): \$ \_\_\_\_\_ per month
2. Federal Income Tax: \$ \_\_\_\_\_ per month
3. State Income Tax: \$ \_\_\_\_\_ per month
4. Social Security Tax: \$ \_\_\_\_\_ per month
5. Medicare Tax: \$ \_\_\_\_\_ per month
6. Unreimbursed Business Expenses: \$ \_\_\_\_\_ per month
7. Premium Paid for Child(ren)'s Health Insurance: \$ \_\_\_\_\_ per month
8. Child Support Actually Paid for Other Children: \$ \_\_\_\_\_ per month  
(Do not include payments towards back child support)
- Total Mandatory Deductions:** \$ \_\_\_\_\_ per month
  
9. **Net Income** (line 1 minus lines 2-8): \$ \_\_\_\_\_ per month

### C. For Unemployed Persons Who Are Capable of ONLY Earning Minimum Wage:

1. Imputed Net Monthly Income (Custodial Parent): \$1,185.67 per month
2. Imputed Net Monthly Income (Non-custodial Parent): \$1,141.25 per month

**Net Income for Plaintiff/Petitioner:** \$ \_\_\_\_\_ per month  
**Net Income for Defendant/Respondent:** \$ \_\_\_\_\_ per month

**\*Gross Income:** Gross income is your income from all sources, including, but not limited to, wages, draws, commissions, bonuses, social security payments, workers' compensation payments, etc. Please give the amount that you make monthly even if you are paid annually, twice a month, weekly, etc. Monthly amounts are calculated by multiplying weekly amount by 52 and dividing by 12; multiplying bi-weekly amounts by 26 and dividing by 12; and multiplying semi-monthly amounts by 24 and dividing by 12.

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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### REPLY TO COUNTERCLAIM

---

Petitioner, hereby replies to Respondent's *Counterclaim* as follows:

1. Petitioner admits the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that are accurate statements)  
of Respondent's *Counterclaim*.
2. Petitioner denies the allegations in Paragraphs \_\_\_\_\_  
(list paragraphs that you believe are not accurate)  
of Respondent's *Counterclaim*.
3. Petitioner does not have information sufficient to either admit or deny the  
allegations in Paragraphs \_\_\_\_\_ of Respondent's  
(list paragraphs that you don't know are accurate or not)  
*Counterclaim*.

**WHEREFORE**, Petitioner respectfully requests that the court find generally in her/his favor and against the Respondent, that Respondent take nothing by way of his/her *Counterclaim*, and for such other and further relief as the court deems just and proper.

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

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

**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 Respondent's/Respondent's Attorney's Name and Address)

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

-----Fill in, if applicable-----  
Pursuant to Rule 102(a)(1)(B) of the Wyoming Uniform Rules of District Court the following attorney has participated in the preparation of this pleading but said attorney is NOT deemed to have entered an appearance in this matter:

\_\_\_\_\_  
Attorney's Name

Attorney's Address/Telephone:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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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**APPLICATION FOR ENTRY OF DEFAULT**

---

The Petitioner submits this *Application for Entry of Default* for a default judgment against the Respondent, \_\_\_\_\_, who has been served the *Petition for Modification of Child Support and Judgment for Arrears* according to the *Affidavit/Return of Service* stating that Respondent **was served on** \_\_\_\_\_ [date], and has failed to reply to or otherwise respond, and the time allowed by law for doing so has now expired. Application is made to enter the default against the Respondent according to law.

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

\_\_\_\_\_  
Signature

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

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

WITNESS my hand and notary seal.

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

My commission expires:

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**

---

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:

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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**ENTRY OF DEFAULT**

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The Clerk of District Court, pursuant to the  Petitioner's OR  Respondent's *Application for Entry of Default and Affidavit in Support of Default*, does hereby enter default against the  Petitioner OR  Respondent for failure to plead or otherwise defend as provided by the Wyoming Rules of Civil Procedure, as appears from examination of the records and files herein or the return upon the original *Summons* filed in this cause.

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

CLERK OF THE DISTRICT COURT

BY: \_\_\_\_\_

Copies to:

Petitioner/Petitioner's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

Respondent/Respondent's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

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. \_\_\_\_\_

---

### REQUEST FOR SETTING

---

The  Petitioner OR  Respondent requests a time and date for a hearing/trial in the District Court. The hearing/trial will take approximately \_\_\_\_\_  hours/ \_\_\_\_\_  minutes and will address the following issues:

1)  The parties have reached an agreement (both parties have signed the *Order Modifying Child Support and Judgment of Arrears* and this Court requires a hearing before it will enter the *Order*). (NOTE: submit the ***Order Setting Hearing*** if this option is selected); OR

2)  Default was entered against  Petitioner OR  Respondent and this Court requires a hearing before it will enter an *Order Modifying Child Support and Judgment of Arrears*. (NOTE: submit the ***Order Setting Hearing*** if this option is selected); OR

3)  The parties are not able to agree on all of the terms of the modification and a hearing is needed on the following issues:

- Child support
- Medical support
- Motion for \_\_\_\_\_
- Other: \_\_\_\_\_

(NOTE: submit the ***Order Setting Hearing*** if this option is selected); OR

4)  The parties are not able to agree on any issues and a trial is needed for a Child Support Modification. (NOTE: submit the ***Order Setting Modification Trial and Requiring Pretrial Statements***.) (NOTE: If a box is checked in paragraph 2, also submit the *Order Setting Hearing*.)

5) Any party requesting the reporting of a particular matter by the official court reporter shall make a request to the appropriate official court reporter as soon as possible, but not less 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.

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

\_\_\_\_\_  
Signature

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

### **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:

(Insert Other Party's/Other Party's Attorney's Name and Address)

TO: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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

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. \_\_\_\_\_

---

**ORDER SETTING HEARING**

---

**THIS MATTER** having come before the Court upon a *Request for Setting*, and the Court being generally advised in the premises;

**IT IS HEREBY ORDERED** that a hearing on the *Petition for Modification of Child Support and Judgment for Arrears* (or other items indicated in the **Request for Setting**) is hereby scheduled for Courtroom No. \_\_\_\_ of the \_\_\_\_\_ County Courthouse, \_\_\_\_\_, Wyoming on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_ commencing at \_\_:\_\_\_\_ o'clock \_\_.M.

(\_\_\_\_) minutes/hour(s)/day(s) has been set aside for the trial of this matter. There will be no continuances or canceling of the hearing date based on telephone calls.

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

\_\_\_\_\_  
DISTRICT COURT JUDGE

Copies to:

Petitioner/Petitioner's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

Respondent/Respondent's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

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. \_\_\_\_\_

---

**ORDER SETTING MODIFICATION TRIAL  
AND REQUIRING PRETRIAL STATEMENTS**

---

**THIS MATTER** having come before the Court upon a *Request for Setting*, and the Court being generally advised in the premises;

**IT IS HEREBY ORDERED** that a trial of the above matter is hereby scheduled for Courtroom No. \_\_\_\_ of the \_\_\_\_\_ County Courthouse, \_\_\_\_\_, Wyoming on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_ commencing at \_\_:\_\_\_\_ o'clock \_\_.m.

(\_\_\_\_) minutes/hour(s)/day(s) has been set aside for the trial of this matter.

**IT IS FURTHER ORDERED** that each party shall file and serve on the opposing party or their attorney, if represented, no later than five (5) days prior to the trial, the party's sworn statement setting forth the facts, to the best of the party's knowledge and belief, called for by Section "A" of the attached list of information, and a statement by counsel (attorney), if any, of the client's position and proof as called for by Section "B." These filings are required to narrow and simplify the issues, prevent surprise and to eliminate unnecessary proof. The material may be presented in narrative form but must be complete for purposes called for by this order. To avoid duplication, the parties or their attorneys, if any, may submit a joint statement of those items not in dispute.

**Any party requesting the reporting of a particular matter by the official court reporter shall make a request to the appropriate official court reporter as soon as possible, but not less 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**

*Order Setting Modification Trial and Requiring Pretrial Statements*

*Effective: July 1, 2023.*

*Page 1 of 3*

**notice through the mail, the request must be received by the court reporter not less 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 Uniform Rules of the District Courts of the State of Wyoming.**

In the event that this case settles, the parties are informed that there will be no change in the scheduling of this matter by the Court until such time as the settlement is reduced to writing and a written agreement is presented to the court. There will be no continuances or canceling of the trial date based on telephone calls.

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

---

DISTRICT COURT JUDGE

Copies sent to:

Petitioner/Petitioner's Attorney's Name and Address

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---

Respondent/Respondent's Attorney's Name and Address

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**SECTION "A"**  
**SWORN STATEMENT OF PARTY**

Items to be included:

1. Personal data and history relevant to the issues, including name, age, prior marriages, if any, children's initials, present living situation of the parties and their immediate family. For instance, where each party and the children are residing, with whom the children are residing, and how the children are being cared for during the day. This item calls for a brief but comprehensive statement of the party's personal history as it may relate to the divorce litigation.
2. Present employment, including identity and location of employer, nature of the job, length of employment, gross and net income and benefits, including health and accident coverage, if any, its convertibility to non-group plan in event of loss of employment, terms of retirement program, all deductions from salary or wages, and prospects for the continuation of the employment.
3. Employment history and employability, including previous employment and incomes, education, training and work experience affecting employability. Include any other factors substantially affecting employability.
4. Other income, whatever the source.
5. Any other information which counsel, or the party, believe to be material to the determination of the issues.

SECTION "B"  
STATEMENT OF COUNSEL

Statement of the case by counsel of the client's position with respect to:

1. Amount of child support:
  - a. Amount called for by the child support guidelines;
  - b. Why, if it is urged, there should be departure from the guidelines.
2. Reasons, either in favor of or against modification of child custody and/or child support.
3. List of witnesses and specific summary of expected testimony.
4. Exhibits.

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. \_\_\_\_\_

---

### PRETRIAL DISCLOSURES

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**NOTE:** Unless otherwise directed by the court, these disclosures must be made **at least 30 days before trial**. Within 14 days thereafter, unless a different time is specified by the court, a party may serve **and promptly file with the Clerk of District Court** a list disclosing (i) any objections to the use under Rule 32 (a) of a deposition designated by another party under Rule 26(a)(3)(B), and (ii) any objection, together with the grounds therefore, that may be made to the admissibility of materials identified under Rule 26(a)(3)(C). Objections not so disclosed, other than objections under Rules 402 and 403 of the Wyoming Rules of Evidence, are waived unless excused by the court for good cause.

Petitioner OR  Respondent submits the following initial disclosures, pursuant to Wyoming Rule of Civil Procedure 26(a)(3), required in pretrial proceedings. This information must be made available to the opposing party or the opposing party's counsel and the Court at least thirty (30) days before the trial.

A. The name and, if not previously provided, the address and telephone number of each witness, separately identifying those whom the party expects to present and those whom the party may call if the need arises.

B. The designation of those witnesses whose testimony is expected to be presented by means of a deposition and, if not taken stenographically (i.e. by a court reporter), a transcript of the pertinent portions of the deposition testimony.

C. An appropriate identification of each document or other exhibit, including summaries of other evidence, separately identifying those which the party expects to offer and those which the party may offer if the need arises.

**NOTE: *Supplementation of disclosures and responses.*** Wyoming Rules of Civil Procedure 26(e)(1) states that: A party who has made a disclosure or responded to a request for discovery with a disclosure or response is under a duty to supplement or correct the disclosure or response to include information thereafter acquired, if ordered by the court or in the following circumstances:

A party is under a duty to supplement at appropriate intervals, its disclosures if the party learns that in some material respect the information disclosed is incomplete or incorrect and if the additional or corrective information has not otherwise been made known to the other parties during the discovery process or in writing.

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

Signature \_\_\_\_\_

Printed name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Phone Number: \_\_\_\_\_

**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/Other Party's Attorney's Name and Address)

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

(check one)



Name of Witness	Address and Telephone Number	Expect to call witness to testify	<i>May</i> call witness to testify if the need arises

Additional sheets of paper are attached if needed

(check one)



Document or Exhibit	Summary of Evidence	Expect to offer	<i>May</i> offer if the need arises

Additional sheets of paper are attached if needed

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. \_\_\_\_\_

---

**ORDER MODIFYING CHILD SUPPORT  
AND JUDGMENT FOR ARREARS**

---

**THIS MATTER** having come before the Court upon the *Petition for Modification of Child Support and Judgment for Arrears*; and the Court, having reviewed the file herein, having heard the arguments of the parties, if applicable, and otherwise being fully advised in the premises, FINDS:

1. This Court has jurisdiction over the parties and the subject matter of these proceedings.

2. The Respondent was served with the *Petition for Modification of Child Support and Judgment of Arrears*: [check one]

- Personally (by the sheriff) on the following date \_\_\_\_\_ in the following state: \_\_\_\_\_; OR
- Respondent accepted service (*Acknowledgement and Acceptance of Service* must be filed. Respondent's signature must be notarized.); OR
- By publication. (*Copy of Affidavit of Publication* must be filed.); OR
- By *Registered or Certified Mail*. (Return receipt must be filed and Clerk must have entered certificate of service.)

3. Respondent filed [check one]

- a *Response*; OR
- a *Response and Counterclaim*; OR
- no response (default must be entered, unless there is a waiver of right to answer); OR
- no response but both parties have signed and agreed to the entry of this Order.

4. A child support order was  
 entered by this Court on \_\_\_\_\_; OR  
(date)  
 entered by the \_\_\_\_\_ Court, \_\_\_\_\_ County, State  
of \_\_\_\_\_.

5. The Order provided for support of the following minor child(ren):

Child's Initials: \_\_\_\_\_ Year of Birth: \_\_\_\_\_

Additional sheets of paper are attached if needed

6. In accordance with Wyo. Stat. § 20-2-304, presumptive child support is calculated as follows:

1. Number of children: \_\_\_\_\_
2. Respondent's net monthly income is: \$ \_\_\_\_\_
3. Petitioner's net monthly income is: \$ \_\_\_\_\_
4. Total child support obligation of both parents is: \$ \_\_\_\_\_
5. Respondent's presumptive child support obligation is: \$ \_\_\_\_\_
6. Petitioner's presumptive child support obligation is: \$ \_\_\_\_\_

6.1. **Restriction on reducing amount of child support:** No agreement which is *less than* the presumed child support amount shall be approved if means tested sources of income such as aid under the personal opportunities with employment responsibilities (POWER) program, Title 19, Kid Care, food stamps, supplemental security income (SSI) or other similar benefits are being paid on behalf of any of the children. **CHECK ONE:**

- The child(ren) receive(s) means tested income;  
 The child(ren) DO NOT receive(s) any means tested income.

6.2. **Amount of Child Support:**  Petitioner OR  Respondent shall pay \$ \_\_\_\_\_ per month for child support. The amount of child support is based upon:

- The presumptive amount of child support determined by Wyoming's Child Support Guidelines; **OR**  
 There is a deviation (an adjustment)  upwards or  downwards from the presumptive amount. In order to deviate, there must be a specific finding that the application of the presumptive child support would be unjust or

inappropriate. The reasons that the presumptive amount is unjust is because (list the specific reasons): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

6.3. **Time of Payments:** Child support payments shall begin:  
 on THE FIRST DAY OF THE MONTH beginning the month of \_\_\_\_\_, 20\_\_\_\_ and shall continue to be paid on the first day of the month thereafter, until further order of the court; **OR**  
 beginning on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ and continuing as follows: \_\_\_\_\_.

6.4. **CONTINUATION OF CHILD SUPPORT:** Child support shall continue during the minor child’s minority, and beyond if the child has a mental, emotional or physical impairment preventing emancipation, or while the child is attending high school or an equivalent program as a full-time student between the ages of 18 and 20. Child support shall terminate if, during the child’s minority, the child marries, is emancipated, becomes self-supporting or dies.

6.5. **PLACE:** All payments required under this Order, shall be made to one of the two following addresses:

Clerk of the District Court, whose address is \_\_\_\_\_ OR State Disbursement Unit  
(see *District Court Clerks Addresses* in this packet): 2300 Capitol Ave.  
Hathaway Bldg.,  
5<sup>th</sup> Floor, Suite A  
Cheyenne, WY 82002

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DO NOT PAY BY PERSONAL CHECK. CASH ACCEPTED IN PERSON ONLY. CASHIER’S CHECKS AND MONEY ORDERS ACCEPTED.**

The Clerk or SDU shall promptly forward the support payments to the receiving parent at the address provided by that parent. **Each party shall pay, when due, all fees charged to that party by the Clerk of District Court, State Disbursement Unit, and any other agency statutorily authorized to charge a fee.**

6.6. **MODIFICATION:** Either party may seek a modification of the child support ordered herein pursuant to Wyo. Stat. §20-2-311.

**MODIFICATION OF CHILD SUPPORT NOT EFFECTIVE UNLESS IT IS APPROVED BY A WRITTEN ORDER SIGNED BY THE JUDGE.**

6.7. **ENFORCEMENT:** Either party has the right to petition to enforce an order pursuant to Wyo. Stat. §20-2-201 through §20-2-204 and §20-2-311(d). Wyoming law states that any payment of child support not paid when due shall automatically become a judgment against the parent who is supposed to pay on the due date. This judgment is subject to a 10% late payment penalty if it is not paid within thirty-two (32) days.

7. **MEDICAL INSURANCE:**

The  Petitioner OR  Respondent OR  Both shall provide health care insurance coverage for the minor child(ren) if insurance can be obtained at a reasonable cost and the benefits under the insurance policy are accessible to the child(ren).

7.A. Proof. The insuring parent shall provide to the Court and the other parent written proof that the insurance has been obtained within sixty (60) days after it became available. Proof of insurance coverage shall contain, at a minimum:

- i) The name of the insurer.
- ii) The policy number.
- iii) The address to which all claims should be mailed.
- iv) A description of any restrictions on usage, such as pre-approval for hospital admission, and the manner in which to obtain pre-approval.
- v) A description of all deductibles.
- vi) Two (2) copies of claim forms.

7.B. Changes. The insuring parent shall provide written notice to the Clerk of this Court and the other parent if insurance coverage for the child is denied, revoked, or altered in any way that would affect the child's coverage, including any change relating to the information required above.

7.C. Failure To Provide Insurance. The Court may hold an obligated parent in contempt for refusing to provide the ordered insurance or for failing or refusing to provide the information required above. In addition, if either parent fails to provide insurance or proof of insurance as required by this agreement, the other parent may provide such insurance and the obligated parent shall be liable to the other parent for the cost of such insurance plus the costs incurred in collection, including reasonable attorney's fees.

7.D. Costs Not Paid For By Insurance. The parents are jointly liable to providers for all health care expenses (including, but not limited to,

medical, dental, orthodontic, optical, prescription drugs, counseling, and all other health care expenses) of the child(ren). All deductibles, co-payments and other expenses for health care that is not paid for by health insurance shall be paid by the parents as follows:

- 50% each by Petitioner and Respondent; **OR**  
 \_\_\_\_\_% by Petitioner and \_\_\_\_\_% by Respondent.

- i) If the insuring parent fails to pay the insurance premium, all health care expenses of the children not covered by insurance shall be the responsibility of that party.
- ii) If the insuring parent fails to maintain insurance as required, that party may be found in contempt of Court and may be required to pay or reimburse the expenses and costs set forth in Wyo. Stat. §20-2-401(e).

**8. CHANGES IN ADDRESS AND EMPLOYMENT:**

Each parent shall inform the other parent and the clerk of court in writing of any change of address, phone number, and employment:

**8.A. CHANGE OF EMPLOYMENT STATUS:** So long as there is a child support obligation, each parent shall notify the other parent and the Clerk of this Court, in writing, on forms available from the Court, within **fifteen (15) days** of any change in employment, including second jobs, changed employers, starting or ending unemployment compensation, and starting or ending of worker's compensation, or any other change in income.

**8.B. CHANGE OF ADDRESS:** So long as there is a child support obligation, if either parent plans to change his or her address, that parent must notify the other parent and the Clerk of this Court, in writing, on forms available from the Clerk of this Court, **no later than fifteen (15) days prior** to the day of the move, the destination of the move and the proposed move date.

**8.C. CHANGE OF HOME CITY OR STATE OF RESIDENCE:** Either parent who plans to change their home city or state of residence, must give written notice **thirty (30) days prior to the move**, both to the other parent and to the clerk of district court stating the date and destination of the move.

**9. INCOME WITHHOLDING ORDER:**

An income withholding order shall be entered and shall become effective as follows:

- Effective immediately (**Recommended**); **OR**

Effective upon the date the Obligor requests withholding commence; or the date the Obligor becomes delinquent in payment of an amount equal to one (1) month's support obligation under the support order. List the reasons why good cause exists to delay the effective date for withholding income: \_\_\_\_\_

\_\_\_\_\_; **OR**  
 OTHER (e.g. Military allotment)\_\_\_\_\_.

**10. PREVIOUS SUPPORT ORDER:**

According to the terms of the most recent court order,  Petitioner OR  Respondent was ordered to pay \$\_\_\_\_\_ per month for the support of the minor child(ren).

**11. JUDGMENT OF ARREARS:**

11.A.  Petitioner OR  Respondent is in arrears in the support obligation in the amount of \$\_\_\_\_\_ from \_\_\_\_\_ **[Date of previous support order]** through \_\_\_\_\_ **[Last day of the month before this Order is filed]** for which judgment shall be entered; AND/OR

Petitioner OR  Respondent owes unpaid medical expenses in the amount of \$\_\_\_\_\_ from \_\_\_\_\_ **[Date of the order establishing medical support]** through \_\_\_\_\_ **[Last day of the month before this Order is filed]**, for which judgment shall be entered; **OR**

11.B.  Petitioner OR  Respondent is current in his/her support obligation.

**IT IS HEREBY ORDERED THAT:**

12. Judgment for past due support, including medical support if applicable, is hereby entered against  Petitioner OR  Respondent in the amount of \$\_\_\_\_\_ through \_\_\_\_\_ **[Date]**. Beginning \_\_\_\_\_ **[Date]**,  Petitioner OR  Respondent shall pay \$\_\_\_\_\_ per month in addition to current support towards the judgment of \$\_\_\_\_\_ **[total amount of judgment listed in paragraph 11.A.]** until the judgment is paid and satisfied in full; OR

Petitioner OR  Respondent is current in his/her support obligation and a judgment for past due support or medical support is not needed.

13. Any provision in the previous order not otherwise modified herein shall remain in full force and effect.

14. **ENFORCEMENT OF ORDER:**

Either party or, when appropriate, the department of family services has the right to petition to enforce an order pursuant to Wyo. Stat. §20-2-201 through 20-2-204, 20-2-310 and 20-2-311(d).

**Contempt - Pursuant to Wyo. Stat. §20-2-204 and 20-2-310, a court having jurisdiction to enforce or revise the decree or order may, upon appropriate motion of either parent, require a parent to appear before the court and show just cause why the parent should not be held in contempt, upon a showing that the parent has willfully violated the decree or order as to the care, custody, visitation and maintenance of the children. The court may, in addition to any assessment it may impose upon a finding that the parent is in contempt of court, award attorney's fees, costs, and such other and further relief as the court may deem necessary under the circumstances, to the parent aggrieved by the violation of the decree or order, in order to enforce and require future compliance with the decree or order.**

15. **LIMITED REPRESENTATION:**

Following Rule 1.2(c) of the Wyoming Rules of Professional Conduct, any attorney who has entered a limited appearance for the purpose of obtaining an Order Modifying Child Support and Judgment for Arrears is now discharged.

**SO ORDERED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
DISTRICT COURT JUDGE

**CHECK ONLY ONE BOX, AND SIGN WHERE INDICATED IN THAT SECTION ONLY:**

***If the parties have agreed:***

I certify that I have read the foregoing *Order Modifying Child Support* and that I agree to the terms and agree to entry of the Order.

\_\_\_\_\_  
**Petitioner's signature**

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

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

Witness my hand and official seal

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

My Commission Expires:

\_\_\_\_\_  
**Respondent's signature**

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

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

Witness my hand and official seal

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

My Commission Expires:

***If default has been entered and the Respondent did not respond:***

The above is true and accurate and I want the court to approve:

\_\_\_\_\_  
Petitioner's signature

*If a court hearing was held:*

APPROVED AS TO FORM:

\_\_\_\_\_  
Petitioner's signature

\_\_\_\_\_  
Respondent's signature

Copies sent to:

Petitioner/Petitioner's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

Respondent/Respondent's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

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

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

Plaintiff: \_\_\_\_\_, )  
 (Print name of person filing) )  
 )  
vs. )  
 )  
Defendant: \_\_\_\_\_ )  
 (Spouse) (Print name)

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

---

### ORDER FOR INCOME WITHHOLDING

---

**THE COURT ORDERS** any payor of \_\_\_\_\_  
(name of Obligor, person owing child support), to pay child support to  
\_\_\_\_\_ (name of Obligee, person owed child support) commencing on  
\_\_\_\_\_ (date). Payments are due on the \_\_\_\_\_ day of every  
\_\_\_\_\_ (specify time period, e.g. month). Total arrears (past due support) owed as of  
\_\_\_\_\_ (date) for child support is \$\_\_\_\_\_.

The Court orders the immediate activation of an order for income withholding against the Obligor, pursuant to Wyo. Stat. § 20-6-204.

Income withheld must be paid to one of the two following addresses:

Clerk of the District Court, whose address is  
(see *District Court Clerks' Addresses* in this  
packet):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OR State Disbursement Unit  
2300 Capitol Ave.  
Hathaway Bldg.,  
5<sup>th</sup> Floor, Suite A  
Cheyenne, WY 82002

**DO NOT PAY BY PERSONAL CHECK. CASH ACCEPTED IN PERSON ONLY.  
CASHIER'S CHECKS AND MONEY ORDERS ACCEPTED.**

The Clerk or SDU shall promptly forward the support payments to the receiving parent at the address provided by that parent. **Each party shall pay, when due, all fees charged to that party by the Clerk of District Court, State Disbursement Unit, and any other agency statutorily authorized to charge a fee.**

**OR**

Pursuant to Wyo. Stat. § 20-6-204, this order for income withholding is not subject to immediate activation because either:

Both parties have agreed in writing to an alternative arrangement. (When the parties agree to an alternative arrangement, the arrangement shall be in writing, signed by the parties and reviewed and entered in the record by the court.)

**OR**

The Court finds there is good cause not to require the immediate activation of an order for income withholding because: (The court shall include in the record its findings of good cause, including a statement explaining why implementation of immediate income withholding would not be in the best interests of the child and, in cases involving modification of child support, proof of timely payments.)

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Any order for income withholding not subject to immediate activation shall become effective upon the date the Obligor requests withholding commence; or the date the Obligor becomes delinquent in payment of an amount equal to one (1) month's support obligation under the support order as set forth in Wyo. Stat. § 20-6-205.

**IT IS FURTHER ORDERED** that upon receipt of a notice of *Income Withholding for Support*, every employer or other person now or in the future owing income to the Obligor shall comply with all terms of the notice and shall withhold a portion of the Obligor's income and remit it to the Clerk at the address in the *Income Withholding for Support* form.

For purposes of this order: "INCOME" means any form of periodic payment or return in money to an individual, regardless of source. Income includes, but is not limited to wages, earnings, salary, commission, compensation as an independent contractor, temporary total disability and permanent partial disability, worker's compensation payments, unemployment compensation, disability, annuity and retirement benefits, and any other payment made by any payor.

Furthermore, no employer may discharge, discipline, refuse employment to, or otherwise penalize an Obligor because of this *Order for Income Withholding* or a subsequently issued *Income Withholding for Support* form.

**IT IS FURTHER ORDERED** that the payor comply with all the terms of an issued *Income Withholding for Support* form and all subsequent notices served upon the payor;

The last known addresses of the Obligor and Obligee are as follows:

Obligor (person owing child support): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Obligee (person to receive child support): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**IT IS, FURTHER, ORDERED** that each party shall notify the Clerk of District Court, in writing, on forms available from the Clerk, within fifteen (15) days of any changes in address or employment status.

At the time this *Order for Income Withholding* is entered, the Clerk shall mail a copy of the order and the support order to the last known address of the Obligor and the Obligee as listed below.\*

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

BY THE COURT:

\_\_\_\_\_  
District Court Judge

Copies sent to:

Plaintiff/Plaintiff's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

Defendant/Defendant's Attorney's Name and Address

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\* Be sure to include addressed/stamped envelopes for you and the defendant when filing this *Order for Income Withholding* so that copies of this Order can be mailed by the Clerk as required by law.

**INCOME WITHHOLDING FOR SUPPORT**

OMB 0970-0154  
Expiration Date: 09/30/2023

**I. Sender Information: (Completed by the Sender)**

Date:

**INCOME WITHHOLDING ORDER/NOTICE FOR SUPPORT (IWO)**

**AMENDED IWO**

**ONE-TIME ORDER/NOTICE FOR LUMP SUM PAYMENT**

**TERMINATION OF IWO**

Child Support Enforcement (CSE) Agency    Court    Attorney    Private Individual/Entity (Check One)

**NOTE:** This IWO must be regular on its face. Under certain circumstances you must reject this IWO and return it to the sender (see IWO instructions [www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions](http://www.acf.hhs.gov/css/resource/income-withholding-for-support-instructions)). If you receive this document from someone other than a state or tribal CSE agency or a court, a copy of the underlying support order must be attached.

State/Tribe/Territory

Remittance ID (include w/payment)

City/County/Dist./Tribe

Order ID

Private Individual Entity

Case ID

**II. Employer and Case Information: (Completed by the Sender)**

RE:

Employer/Income Withholder's Name

Employee/Obligor's Name (Last, First, Middle)

Employer/Income Withholder's Address

Employee/Obligor's Social Security Number

Employee/Obligor's Date of Birth

Custodial Party/Obligee's Name (Last, First, Middle)

Employer/Income Withholder's FEIN

Child(ren)'s Name(s) (Last, First, Middle)

Child(ren)'s Birth Date(s)

**III. Order Information: (Completed by the Sender)**

This document is based on the support order from

(State/Tribe).

You are required by law to deduct these amounts from the employee/obligor's income until further notice.

\$	Per	current child support		
\$	Per	past-due child support - Arrears greater than 12 weeks?	Yes	No
\$	Per	current cash medical support		
\$	Per	past-due cash medical support		
\$	Per	current spousal support		
\$	Per	past-due spousal support		
\$	Per	other (must specify)		

for a **Total Amount to Withhold** of \$ \_\_\_\_\_ per \_\_\_\_\_

**IV. Amounts to Withhold: (Completed by the Sender)**

You do not have to vary your pay cycle to be in compliance with the *Order Information*. If your pay cycle does not match the ordered payment cycle, withhold one of the following amounts:

\$ \_\_\_\_\_ per weekly pay period                      \$ \_\_\_\_\_ per semimonthly pay period (twice a month)

\$ \_\_\_\_\_ per biweekly pay period (every two weeks)    \$ \_\_\_\_\_ per monthly pay period

\$ \_\_\_\_\_ **Lump Sum Payment:** Do not stop any existing IWO unless you receive a termination order.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to provide uniformity and standardization. Public reporting burden for this collection of information is estimated to average two to five minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information in accordance with 45 CFR 303.100 of the Child Support Enforcement Program. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information, please contact the Employer Services Team by email at [employerservices@acf.hhs.gov](mailto:employerservices@acf.hhs.gov).

Employer/Income Withholder's Name:

Employer/Income Withholder's FEIN:

Employee/Obligor's Name:

SSN:

Case ID:

Order ID:

**V. Remittance Information: (Completed by the Sender except for the "Return to Sender" check box.)**

If the employee/obligor's principal place of employment is (State/Tribe), you must begin withholding no later than the first pay period that occurs days after the date of of the order/notice. Send payment within business days of the pay date. If you cannot withhold the full amount of support for any or all orders for this employee/obligor, withhold % of disposable income for all orders. If the employee/obligor's principal place of employment is not (State/Tribe), obtain withholding limitations, time requirements, the appropriate method to allocate among multiple child support cases/orders and any allowable employer fees from the jurisdiction of the employee/obligor's principal place of employment.

State-specific withholding limit information is available at [www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements](http://www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements). For tribe-specific contacts, payment addresses, and withholding limitations, please contact the tribe at [www.acf.hhs.gov/sites/default/files/programs/css/tribal\\_agency\\_contacts\\_printable\\_pdf.pdf](http://www.acf.hhs.gov/sites/default/files/programs/css/tribal_agency_contacts_printable_pdf.pdf) or [www.bia.gov/tribalmap/DataDotGovSamples/tld\\_map.html](http://www.bia.gov/tribalmap/DataDotGovSamples/tld_map.html).

You may not withhold more than the lesser of: 1) the amounts allowed by the Federal Consumer Credit Protection Act (CCPA) [15 USC §1673 (b)]; or 2) the amounts allowed by the law of the state of the employee/obligor's principal place of employment if the place of employment is in a state; or the tribal law of the employee/obligor's principal place of employment if the place of employment is under tribal jurisdiction. The CCPA is available at [www.dol.gov/sites/dolgov/files/WHHD/legacy/files/garn01.pdf](http://www.dol.gov/sites/dolgov/files/WHHD/legacy/files/garn01.pdf). If the Order Information section does not indicate that the arrears are greater than 12 weeks, then the employer should calculate the CCPA limit using the lower percentage.

If there is more than one IWO against this employee/obligor and you are unable to fully honor all IWOs due to federal, state, or tribal withholding limits, you must honor all IWOs to the greatest extent possible, giving priority to current support before payment of any past-due support.

If the obligor is a nonemployee, obtain withholding limits from the **Supplemental Information** section in this IWO. This information is also available at [www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements](http://www.acf.hhs.gov/css/resource/state-income-withholding-contacts-and-program-requirements).

<b>Remit payment to</b>	(SDU/Tribal Order Payee)
at	(SDU/Tribal Payee Address)
Include the Remittance ID with the payment and if necessary this locator code of the SDU/Tribal order payee on the payment.	
To set up electronic payments or to learn state requirements for checks, contact the State Disbursement Unit (SDU). Contacts and information are found at <a href="http://www.acf.hhs.gov/css/resource/sdu-efit-contacts-and-program-requirements">www.acf.hhs.gov/css/resource/sdu-efit-contacts-and-program-requirements</a> .	

**Return to Sender (Completed by Employer/Income Withholder).** Payment must be directed to an SDU in accordance with sections 466(b)(5) and (6) of the Social Security Act or Tribal Payee (see Payments in Section VI). If payment is not directed to an SDU/Tribal Payee or this IWO is not regular on its face, you must check this box and return the IWO to the sender.

<b>If Required by State or Tribal Law:</b>
Signature of Judge/Issuing Official:
Print Name of Judge/Issuing Official:
Title of Judge/Issuing Official:
Date of Signature:

If the employee/obligor works in a state or for a tribe that is different from the state or tribe that issued this order, a copy of this IWO must be provided to the employee/obligor.

If checked, the employer/income withholder must provide a copy of this form to the employee/obligor.

Employer/Income Withholder's Name:

Employer/Income Withholder's FEIN:

Employee/Obligor's Name:

SSN:

Case ID:

Order ID:

**VI. Additional Information for Employers/Income Withholders: (Completed by the Sender)**

**Priority:** Withholding for support has priority over any other legal process under State law against the same income (section 466(b)(7) of the Social Security Act). If a federal tax levy is in effect, please notify the sender.

**Payments:** You must send child support payments payable by income withholding to the appropriate State Disbursement Unit or to a tribal CSE agency within 7 business days, or fewer if required by state law, after the date the income would have been paid to the employee/obligor and include the date you withheld the support from his or her income. You may combine withheld amounts from more than one employee/obligor's income in a single payment as long as you separately identify each employee/obligor's portion of the payment. Child support payments may not be made through the federal Office of Child Support Enforcement (OCSE) Child Support Portal.

**Lump Sum Payments:** You may be required to notify a state or tribal CSE agency of upcoming lump sum payments to this employee/obligor such as bonuses, commissions, or severance pay. Contact the sender to determine if you are required to report and/or withhold lump sum payments. Employers/income withholders may use OCSE's Child Support Portal ([ocsp.acf.hhs.gov/csp/](http://ocsp.acf.hhs.gov/csp/)) to provide information about employees who are eligible to receive lump sum payments and to provide contacts, addresses, and other information about their companies. Child support payments may not be made through the federal OCSE Child Support Portal.

**Liability:** If you have any doubts about the validity of this IWO, contact the sender. If you fail to withhold income from the employee/obligor's income as the IWO directs, you are liable for both the accumulated amount you should have withheld and any penalties set by state or tribal law/procedure.

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**Anti-discrimination:** You are subject to a fine determined under state or tribal law for discharging an employee/obligor from employment, refusing to employ, or taking disciplinary action against an employee/obligor because of this IWO.

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**Supplemental Information:** \_\_\_\_\_

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Employer/Income Withholder's Name:

Employer/Income Withholder's FEIN:

Employee/Obligor's Name:

SSN:

Case ID:

Order ID:

**VII. Notification of Employment Termination or Income Status: (Completed by the Employer/Income Withholder)**

If this employee/obligor never worked for you or you are no longer withholding income for this employee/obligor, you must promptly notify the CSE agency and/or the sender by returning this form to the address listed in the **Contact Information** section below or using OCSE's Child Support Portal ([ocsp.acf.hhs.gov/csp/](http://ocsp.acf.hhs.gov/csp/)). Please report the new employer or income withholder, if known.

This person has never worked for this employer nor received periodic income.

This person no longer works for this employer nor receives periodic income.

Please provide the following information for the employee/obligor:

Termination date:

Last known telephone number:

Last known address:

Final payment date to SDU/Tribal Payee:

Final payment amount:

New employer's or income withholder's name:

New employer's or income withholder's address:

**VIII. Contact Information: (Completed by the Sender)**

**To Employer/Income Withholder:** If you have questions, contact \_\_\_\_\_ (sender name) by

telephone: \_\_\_\_\_, by fax: \_\_\_\_\_, by email or website: \_\_\_\_\_.

Send termination/income status notice and other correspondence to:

\_\_\_\_\_  
(sender address).

**To Employee/Obligor:** If the employee/obligor has questions, contact \_\_\_\_\_ (sender name)

by telephone: \_\_\_\_\_, by fax: \_\_\_\_\_, by email or website: \_\_\_\_\_.

IMPORTANT: The person completing this form is advised that the information may be shared with the employee/obligor.

**Encryption Requirements:**

When communicating this form through electronic transmission, precautions must be taken to ensure the security of the data. Child support agencies are encouraged to use the electronic applications provided by the federal Office of Child Support Enforcement. Other electronic means, such as encrypted attachments to emails, may be used if the encryption method is compliant with Federal Information Processing Standard (FIPS) Publication 140-2 (FIPS PUB 140-2).

## List of Addresses for the Clerk of District Court Offices

**First Judicial District,  
Laramie County**

Clerk of District Court  
P.O. Box 787  
Cheyenne, Wyoming 82003  
(307) 633-4270

**Second Judicial District,  
Albany County**

Clerk of District Court  
525 Grand Avenue, Ste. 305  
Laramie, Wyoming 82070  
(307) 721-2508

**Second Judicial District,  
Carbon County**

Clerk of District Court  
P.O. Box 67  
Rawlins, Wyoming 82301  
(307) 328-2628

**Third Judicial District,  
Lincoln County**

Clerk of District Court  
P.O. Drawer 510  
Kemmerer, Wyoming 83101  
(307) 877-2053

**Third Judicial District,  
Sweetwater County**

Clerk of District Court  
P.O. Box 430  
Green River, Wyoming 82935  
(307) 872-3820

**Third Judicial District,  
Uinta County**

Clerk of District Court  
P.O. Box 1906  
Evanston, Wyoming 82931  
(307) 783-0401

**Fourth Judicial District,  
Johnson County**

Clerk of District Court  
620 W. Fetterman, Ste. 208  
Buffalo, Wyoming 82834  
(307) 684-7271

**Fourth Judicial District,  
Sheridan County**

Clerk of District Court  
224 S. Main Street,  
Room B-11  
Sheridan, Wyoming 82801  
(307) 674-2960

**Fifth Judicial District,  
Big Horn County**

Clerk of District Court  
P.O. Box 670  
Basin, Wyoming 82410-0670  
(307) 568-2381

**Fifth Judicial District,  
Hot Springs County**

Clerk of District Court  
415 Arapahoe  
Thermopolis, Wyoming 82443  
(307) 864-3323

**Fifth Judicial District,  
Park County**

Clerk of District Court  
P.O. Box 1960  
Cody, Wyoming 82414-1960  
(307) 527-8690

**Fifth Judicial District,  
Washakie County**

Clerk of District Court  
P.O. Box 862  
Worland, Wyoming 82401  
(307) 347-4821

**Sixth Judicial District,  
Campbell County**

Clerk of District Court  
P.O. Box 817  
Gillette, Wyoming 82716  
(307) 682-3424

**Sixth Judicial District,  
Crook County**

Clerk of District Court  
P.O. Box 406  
Sundance, Wyoming 82729  
(307) 283-2523

**Sixth Judicial District,  
Weston County**

Clerk of District Court  
1 West Main St.  
Newcastle, Wyoming 82701  
(307) 746-4778

**Seventh Judicial District,  
Natrona County**

Clerk of District Court  
115 N. Center St., Ste. 100  
Casper, Wyoming 82601  
(307) 235-9243

**Eighth Judicial District,  
Converse County**

Clerk of District Court  
107 N. 5th St.  
Douglas, Wyoming 82633  
(307) 358-3165

**Eighth Judicial District,  
Goshen County**

Clerk of District Court  
P.O. Box 818  
Torrington, Wyoming 82240-0818  
(307) 532-2155

**Eighth Judicial District,  
Niobrara County**

Clerk of District Court  
P.O. Box 1318  
Lusk, Wyoming 82225  
(307) 334-2736

**Eighth Judicial District,  
Platte County**

Clerk of District Court  
P.O. Box 158  
Wheatland, Wyoming 82201  
(307) 322-3857

**Ninth Judicial District,  
Fremont County**

Clerk of District Court  
P.O. Box 370  
Lander, Wyoming 82520  
(307) 332-1134

## List of Addresses for the Clerk of District Court Offices

**Ninth Judicial District,  
Sublette County**  
Clerk of District Court  
P.O. Box 764  
Pinedale, Wyoming 82941  
(307) 367-4376

**Ninth Judicial District,  
Teton County**  
Clerk of District Court  
P.O. Box 4460  
Jackson, Wyoming 83001  
(307) 733-2533