STATE OF WYOMING   )   IN THE DISTRICT COURT
) ss
COUNTY OF _____   )   _____ JUDICIAL DISTRICT

Petitioner:_____,)   Civil Action Case No. _____
        (Print name of person filing)   )
)
vs.   )
)
Respondent:_____ .)
        (Print name of other party)

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, has 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 nor 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: