

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. \_\_\_\_\_

You will fill out the top portion of this form!  
The Defendant will complete the rest of the form.

---

### ACKNOWLEDGEMENT AND ACCEPTANCE OF SERVICE

---

I, \_\_\_\_\_, hereby acknowledge receipt of a copy of the *Summons*,  
(Print Defendant's Name)  
*Complaint for Divorce*, 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 Plaintiff in accordance with the Wyoming Rules of Civil Procedure within the time limits stated, I will be in default and Plaintiff may be afforded the relief demanded in the *Complaint for Divorce* without a trial or other hearing.

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

\_\_\_\_\_  
Defendant's Signature  
Defendant's Phone Number: \_\_\_\_\_  
Defendant's Address: \_\_\_\_\_  
Defendant's 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*  
July 2014  
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 Plaintiff/Plaintiff's Attorney's Name and Address)

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

This is the Defendant's signature and name.



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

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