STATE OF WYOMING)	IN THE	E DISTRICT COURT			
COUNTY OF) ss)	JUDICIAL DISTRICT				
Plaintiff:(Print name of person filing		Civil Action Case No				
vs.)	SUMMONS				
Defendant: (Spouse) (Print name)	´)	Add the De	efendant's			
To the above named Defendant: Print Defendant's Name: Home Address:		name and i	nformation			
Phone: Employer Name & Address:						
Plaintiff or Plaintiff's attorney if s/h served upon you, within 20 days aft (If service upon you is made outside answer to the <i>Complaint for Divorce</i> the day of service.) If you fail to demanded in the <i>Complaint for Divorce</i>	e has one, an Ar er service of this de of the state of e within 30 days do so, judgmen	s Summons upon you, exclusive of Wyoming, you are required after service of this Summons	vorce which is herewith ye of the day of service. to file and serve your upon you, exclusive of			
Dated	, 20	·	The Clerk will			
(Seal of District Court)			complete and sign			
	Cle	rk of Court				
	By: De _l	outy Clerk				
Plaintiff's Name	Add your name and					
Address	information	J				
Phone Number						



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

<u>RETURN</u>

STATE OF WY	YOMING)					
) ss					
COUNTY OF		_) TO BE USED BY WYOMING SHERIFF, UNDER					
_					DEPUTY		_
I,	•	.1 C C	. 1 1 1	_, Sh	eriff in and	d for said Co ceived the within S	unty of
together with a Support Order, the d	copy of the Co filed in the al ay of	omplaint for bove entitled	Divorce and to display the display the display the display the display and the display the di	he <i>Cor</i> hat I so by del	nfidential States erved the same ivering a copy	ment of the Parties in the County afo of the same, togeth	for Child resaid on ner with a
copy of the Con	nplaint for Div	orce, to:					
					61 :66		
				By:	Sheriff		
					Deputy Sher	iff	
Sheriff's fees:	Service,	\$; Return	\$	Deputy Sher		
	Mileage	\$; Total	\$			
		AF	FIDAVIT OF	SERV	ICE		
STATE OF)					
COLDIENTOE						THER THAN WY	OMING
COUNTY OF _		_)	SHERIFF, U	INDE	R SHERIFF OF	R DEPUTY	
service of said delivering a cop	Summons in py of the same	ot a party to the County e, together	o the foregoing aforesaid on with a copy of	g action the _	n or interested day of	therein, and that s , 20 bivorce and the Co	he made, by
Statement of the	e Parties for C	hild Support	t Order, to:				
Name:							
Address:							
				By:			<u> </u>
Subscribed and sworn to before me this			ne this	da	ay of	, 20	
My Commission	n Expires:			Notar	ial Officer		

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