STATE OF WYOMING	)		IN THE DISTRICT COURT
COUNTY OF	) ss )	_	JUDICIAL DISTRICT
Plaintiff/Petitioner:(Print name of p		,)	Civil Action Case No
VS.		) ) )	
Defendant/Respondent:(Print na	me of other party)	)	
MOTION FOR	(describe	e what you	are requesting from the Court)
		-	ent in this action. I am requesting that:  — TYPE OR PRINT CLEARLY-
Attach additional sheets of	naner if needed	1	
My reasons are:	paper ii needed		
Attach additional sheets of	paper if needed	1.	
<b>DATED</b> this day of		·,	20
	Address:	Name:	
	Phone Nu	umber:	

Motion Form 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 name and address of other party)	
TO:	_
	_
	_
	Vous si an atura
	Your signature
	Print name