
**In the District Court of the State of Wyoming
Fourth Judicial District, Johnson County**

Docket # _____

vs

NOTARIZED AFFIDAVIT OF DIRECT CHILD SUPPORT PAYMENT

Custodial Parent Name: _____

Non-Custodial Parent Name: _____

I hereby acknowledge that I have received child support directly from the above-named non-custodial parent, in the amount of \$ _____, for the month(s) of _____, year of 20_____.

Custodial Parent Signature

Mailing Address

City/State/Zip Code

Telephone Number

Subscribed and sworn to before me by _____ on this
_____ day of _____, 20_____.

My Commission Expires: _____

Notary Public/Clerk of Court