

STATE OF WYOMING )  
 ) SS  
COUNTY OF \_\_\_\_\_)

IN THE DISTRICT COURT  
\_\_\_\_\_ JUDICIAL DISTRICT

IN THE MATTER OF THE ADOPTION OF )  
 )  
 )  
 )  
 )  
 )  
 )  
 \_\_\_\_\_)

CASE # \_\_\_\_\_  
**BIRTH GRANDPARENT'S AFFIDAVIT  
AND PETITION TO APPOINT A  
CONFIDENTIAL INTERMEDIARY,  
PURSUANT TO W.S. 1-22-203(b)**

\_\_\_\_\_, being first duly sworn, on oath, petitions and says:  
(petitioner's name)

My telephone numbers are: (home) \_\_\_\_\_ (work) \_\_\_\_\_

(cell) \_\_\_\_\_. E-mail address \_\_\_\_\_

Mailing address \_\_\_\_\_.

My birth grandson/granddaughter was born in \_\_\_\_\_ on \_\_\_\_\_  
(city/county)  
\_\_\_\_\_ and is 18 years of age or older.

(date of birth)  
Date of relinquishment: \_\_\_\_\_ City/County \_\_\_\_\_.

Birth parents' names at the time of relinquishment: \_\_\_\_\_

The adoption was finalized in \_\_\_\_\_ Unknown \_\_\_\_\_  
(City County)

I know the following about my birth grandson's/granddaughter's adoptive family: \_\_\_\_\_

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I am seeking my birth grandson/granddaughter because: \_\_\_\_\_

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I, therefore, petition this court and respectfully request that an order be entered appointing a confidential intermediary, pursuant to W.S. 1-22-203(b) and that the confidential intermediary be allowed to inspect and copy, at the petitioner's expense, the pertinent adoption files of the court, governmental agencies, adoption agencies and hospitals.

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

\_\_\_\_\_  
(Petitioner's signature)

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

My commission expires:

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\_\_\_\_\_  
NOTARY PUBLIC OR DEPUTY CLERK OF COURT