

Superior Court of Washington, County of Island

_____ Petitioner (Protected Person) Date of Birth _____ vs. _____ Respondent (Restrained Person) Date of Birth _____	No. Proof of Service (RTS) Clerk's Action Required:2
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Proof of Service

Server declares:

1. My name is _____. I am 18 or older. I am a peace officer not a party to this case.

2. Able to Serve:

Personal Service: I served the court documents checked in section 4 for this case to (name of party) _____ on (date) _____ at (time) _____ by giving the documents directly to them at this address: _____

Electronic Service:

Important! Do not use electronic service if your case involves the surrender of firearms, transfer of child custody, removing respondent from the parties' shared residence, an incarcerated respondent, or a petition for a vulnerable adult protection order is filed by someone other than the vulnerable adult. After 2 unsuccessful attempts at personal service, you can ask the court to authorize electronic service. Court authorization is not necessary for vulnerable adult protection orders.

I served the court documents checked in section 4 for this case to (name of party) _____ on (date) _____ at (time) _____ via

email text social media applications other technology

At the following email address/s, phone number/s, social media application and user name, or other address: _____

I received a read receipt or communication from the receiving party (describe or attach): _____

Service by Mail: I served the court documents checked in section 4 for this case to
 (name of party) _____
 on (date) _____
 at (time) _____.
 I sent **2** copies of the documents, postage prepaid: one by ordinary, first-class mail
 and one by other mail with certified or tracking information (*attach receipts*). I sent
 the mail to this/these address/es: _____.

Clerk's Action: The court clerk shall forward a copy of this proof of service to the
 following law enforcement agency where the respondent resides (county or city)
 (check only one): _____

Sheriff's Office or Police Department

3. Not Able to Serve:

I was unable to make personal service on (name of party) _____.
 I notified the serving party that service was not successful. Personal service was
 attempted on the following date/s _____.

Electronic service was attempted at the following address/es but it bounced back,
 was undeliverable, or there was no follow-up communication _____

I did not mail court documents to (name of party) _____
 because I do not know the party's last known address.

4. List of Documents:

Important! You must check or write in the title of **every** document that you served. Use the "Other Documents" box to write in the title of any document not already listed.

I served the following documents (*check all that apply*):

New Petition:	After a Full Hearing:
<input type="checkbox"/> Petition for Protection Order	<input type="checkbox"/> Protection Order
<input type="checkbox"/> Temporary Protection Order and Hearing Notice	<input type="checkbox"/> Order to Surrender and Prohibit Weapons
<input type="checkbox"/> Reissuance of Temporary Protection Order and Notice of Hearing	<input type="checkbox"/> Order Realigning Parties
<input type="checkbox"/> Order to Surrender and Prohibit Weapons (issued without notice)	
<input type="checkbox"/> Order Transferring Case and Setting Hearing	
<input type="checkbox"/> Declaration/s of: _____	
<input type="checkbox"/> Denial Order	
<input type="checkbox"/> Notice to Vulnerable Adult	

<p>Renewals:</p> <p><input type="checkbox"/> Motion for Renewal of Protection Order</p> <p><input type="checkbox"/> Order Setting Hearing on Renewal <input type="checkbox"/> and Extending Order until Hearing</p> <p><input type="checkbox"/> Order for Renewal of Order for Protection</p>	<p>Motions:</p> <p><input type="checkbox"/> Motion to Modify or Terminate Protection Order</p> <p><input type="checkbox"/> Motion for Surrender and Prohibition of Weapons</p> <p><input type="checkbox"/> Notice of Hearing</p> <p><input type="checkbox"/> Motion to Realign Parties</p> <p><input type="checkbox"/> Motion to Set Show Cause Hearing - Contempt</p> <p><input type="checkbox"/> Order on Hearing - Contempt</p> <p><input type="checkbox"/> Order re Adequate Cause</p>
<p><input type="checkbox"/> Order Setting Hearing – Sexual Assault</p> <p><input type="checkbox"/> Order on Motion for Renewal of Sexual Assault Protection Order</p>	<p>After a Motion Hearing:</p> <p><input type="checkbox"/> Order Modifying or Terminating Protection Order</p> <p><input type="checkbox"/> Order to Surrender and Prohibit Weapons</p>
<p>Other Documents:</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p> <p><input type="checkbox"/> _____</p>	

5. Fees Charged for Service:

Does not apply.

Fees: \$ _____ + Mileage \$ _____ = Total: \$ _____

6. Other: _____

I declare under penalty of perjury under the laws of the State of Washington that the statements on this form are true.

Signed at (*city and state*): _____ Date: _____

▶ _____
Signature of server

Print or type name of server

Law Enforcement Agency (if any)