

Superior Court of Washington, County of _____

In the Guardianship/Conservatorship of:

Respondent/Minor/s

No. _____

**Proof of Service (Other than
Personal Service)
(AFSR)**

Proof of Service (Other than Personal Service)

*To be used when personal service is **not** required.*

I declare:

1. Who is Serving

I am (*check one*): the petitioner the guardian/conservator (*name*): _____
_____ and I am competent to be a witness in this case.

2. Type of Service

Proof of Mailing, Hand Delivery, or Delivery by Email I served true and correct copies of the (*list titles of documents below*):

<input type="checkbox"/> Guardian/Conservator's Plan	<input type="checkbox"/> Inventory
<input type="checkbox"/> Notice of Right to Object to Plan	<input type="checkbox"/> Guardian/Conservator's Report
<input type="checkbox"/> Notice of Substantial Change in Circumstances	<input type="checkbox"/> Notice of Rights
<input type="checkbox"/> Order _____	<input type="checkbox"/> Notice of Hearing _____
<input type="checkbox"/> Proposed Residential Schedule	<input type="checkbox"/> Declaration of: _____
<input type="checkbox"/> Proposed Child Support Order	<input type="checkbox"/> Proposed Child Support Worksheets
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Declaration of: _____
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Motion for _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

on (date) _____ at (time) _____ [] a.m. [] p.m. to the following individuals at the following addresses by the method indicated: (If additional space is needed, attach a separate sheet of paper.)

Name/s: _____ [] Hand Delivered

[] Regular 1st Class US Mail
Address: _____ [] Certified Mail,
Return Receipt Requested

[] Other: _____

Name/s: _____ [] Hand Delivered

(Personal Service)
[] Regular 1st Class US Mail
Address: _____ [] Certified Mail,
Return Receipt Requested

[] Other: _____

Name/s: _____ [] Hand Delivered

(Personal Service)
[] Regular 1st Class US Mail
Address: _____ [] Certified Mail,
Return Receipt Requested

[] Other: _____

Name/s: _____ [] Hand Delivered

(Personal Service)
[] Regular 1st Class US Mail
Address: _____ [] Certified Mail,
Return Receipt Requested

[] Other: _____

(Attach Return Receipt if service by certified mail.)

I declare under penalty of perjury under the laws of the State of Washington that the statements above are true and correct.

Signed at (city and state) _____ on (date) _____

Signature

Printed Name