

Superior Court of Washington, County of _____

In re:

Petitioner/s (*person/s who started this case*):

And Respondent/s (*other party/parties*):

No. _____

Order to Allow Service by Mail
(ORRSR)

Order to Allow Service by Mail

1. The court has considered the *Motion to Serve by Mail* filed by the (*check one*):
☐ Petitioner ☐ Respondent. The *Motion* shows a valid reason to serve by mail.
2. The requesting party may serve the *Summons* and *Petition* in this case by mail to
(*name*): _____ as follows:

- ☐ to their last known mailing address:

street number or P.O. box *city* *state* *zip*

- ☐ to this other appropriate address:

Addressed to them: ☐ directly ☐ in care of (*name*): _____
at:

street number or P.O. box *city* *state* *zip*

- ☐ other: _____

3. To Serve by Mail:

- The requesting party may use the *Summons by Mail* form (FL All Family 106).
- The *server* must be someone age 18 or older who is **not** a party to this case.
- The *server* must mail **two copies** of the court papers to each address listed above.
 - Mail one copy of the court papers by regular, prepaid first class mail.
 - Mail the other copy by certified mail, with return receipt requested.
- Each envelope must show the requesting party's (not the *server's*) return address. The return address may be the requesting party's lawyer's address or any other address where the requesting party agrees to receive legal papers.
- Fill out and file a *Proof of Service by Mail* (form FL All Family 107).

Ordered.

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| <hr style="border: none; border-top: 1px solid black;"/> | | <hr style="border: none; border-top: 1px solid black;"/> |
| <i>Date</i> | | <i>Judge or Commissioner</i> |

Presented by: ☐ Petitioner or lawyer ☐ Respondent or lawyer

| | |
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| <hr style="border: none; border-top: 1px solid black;"/> | <hr style="border: none; border-top: 1px solid black;"/> |
| <i>Sign here</i> | <i>Print name (if lawyer, also provide WSBA #)</i> |