

Superior Court of Washington, County of \_\_\_\_\_

In re: Guardianship/Conservatorship of:

Case No. \_\_\_\_\_

\_\_\_\_\_,  
Respondent/Minor/s

**Proof of Personal Service  
(AFSR)**

**Proof of Personal Service**

I declare:

**1. Who is Serving**

This is original Service of Process I am 18 years of age or older, I am not a party to this action, and I am competent to be a witness. *(Use for Personal Service)*

**2. Service**

I served court documents for this case to *(name of party)*: \_\_\_\_\_

on *(date)*: \_\_\_\_\_ at *(time)*: \_\_\_\_\_ [ ] a.m. [ ] p.m.

Address:

\_\_\_\_\_  
*Number and Street* *City* *State* *Zip*

by giving the documents directly to them.

**3. I served true and correct copies of the *(list titles of documents below)*:**

<input type="checkbox"/> Petition for Guardianship, Conservatorship, and/or a Protective Arrangement	
<input type="checkbox"/> Notice of Petition for Guardianship, Conservatorship, and/or a Protective Arrangement	
<input type="checkbox"/> Notice of Hearing <i>(date)</i> _____	<input type="checkbox"/> Order Appointing Court Visitor
<input type="checkbox"/> Minor Guardianship Petition	<input type="checkbox"/> Notice of Hearing – Minor Guardianship Petition
<input type="checkbox"/> Emergency Minor Guardianship Petition	<input type="checkbox"/> Notice of Hearing – Emergency Minor Guardianship Petition
<input type="checkbox"/> Petition to Terminate or Change a Minor Guardianship or Non-Parent Custody Order	<input type="checkbox"/> Notice about Terminating or Changing a Minor Guardianship or Non-Parent Custody Order
<input type="checkbox"/> Summons	<input type="checkbox"/> Proposed Residential Schedule
<input type="checkbox"/> Declaration of _____	<input type="checkbox"/> Declaration of _____

<input type="checkbox"/> Notice of Intent to Move with Children (Relocation)	<input type="checkbox"/> Objection about Moving with Children and Petition about Changing a Parenting/ Custody Order (Relocation)
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

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*