

_____ Court of Washington, County of _____

Petitioner Date of Birth

vs.

Respondent Date of Birth

No. _____

Proof of Service

(RTS)

Clerk's Action Required: 2C

Proof of Service

Important! Promptly file this completed form with the court clerk.

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:**

A. **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:

B. **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. In these cases, after 2 unsuccessful attempts at personal service, you can ask the court to authorize electronic service.

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*): _____

C. **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* immediately to the following law enforcement agency (*county or city*) _____ (*check only one*): Sheriff's Office or Police Department (*List the same agency that entered the temporary order, if any*)

This agency shall enter this Proof of Service into WACIC and National Crime Info. Center (NCIC).

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"/> Order to Surrender and Prohibit Weapons	<input type="checkbox"/> Order Realigning Parties
<input type="checkbox"/> A blank Law Enforcement and Confidential Information Form	<input type="checkbox"/> Order Extending Order to Surrender and Prohibit Weapons
<input type="checkbox"/> Order Transferring Case and Setting Hearing	
<input type="checkbox"/> Reissuance of Temporary Protection Order and Notice of Hearing	
<input type="checkbox"/> Declaration/s of: _____	

<p>_____</p> <p>_____</p> <p><input type="checkbox"/> Denial Order</p> <p><input type="checkbox"/> Notice to Vulnerable Adult</p>	
<p>Renewals</p> <p><input type="checkbox"/> Motion for Renewal of Protection Order</p> <p><input type="checkbox"/> Order Setting Hearing on Renewal 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>Weapons Compliance</p> <p><input type="checkbox"/> Findings and Order on Review: Weapons Surrender Compliance</p> <p><input type="checkbox"/> Order on Hearing - Contempt</p> <p><input type="checkbox"/> A blank Proof of Surrender</p> <p><input type="checkbox"/> A blank Declaration of Non-Surrender</p> <p><input type="checkbox"/> Receipt for Surrender Weapons and Concealed Pistol License</p> <p><input type="checkbox"/> Order to Release Weapons</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. Firearms/Deadly Weapons:

If an *Order to Surrender and Prohibit Weapons* has been issued in this case. Restrained Person:

- surrendered** the firearms deadly weapons CPL.
(file *Law Enforcement Receipt* separately).
- did not surrender** the firearms/deadly weapons specified in the order (*provide details related to what happened, including any denials of ownership/possession*):

asserted they have no firearms, deadly weapons, or a CPL.

7. **Other** (include details such as conduct at time of service, threats, avoidance of service, and statements regarding firearms possession): _____

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)