**Superior Court of Washington, County of King**

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| --- | --- |
|  Petitioner (Protected Person) Date of Birthvs.Respondent (Restrained Person) Date of Birth | **No**. **Proof of Service****(RTS)**Clerk’s Action Required:2 |

**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:***[ ] Petition for Protection Order[ ] Temporary Protection Order and Hearing Notice[ ] Reissuance of Temporary Protection Order and Notice of Hearing[ ] Order to Surrender and Prohibit Weapons (issued without notice)[ ] Order Transferring Case and Setting Hearing[ ] Declaration/s of:[ ] Denial Order[ ] Notice to Vulnerable Adult | ***After a Full Hearing:***[ ] Protection Order[ ] Order to Surrender and Prohibit Weapons[ ] Order Realigning Parties |

|  |  |
| --- | --- |
| ***Renewals:***[ ] Motion for Renewal of Protection Order [ ] Order Setting Hearing on Renewal [ ] and Extending Order until Hearing[ ] Order for Renewal of Order for Protection | ***Motions:***[ ] Motion to Modify or Terminate Protection Order[ ] Motion for Surrender and Prohibition of Weapons[ ] Notice of Hearing[ ] Motion to Realign Parties[ ] Motion to Set Show Cause Hearing - Contempt[ ] Order on Hearing - Contempt[ ] Order re Adequate Cause |
| [ ] Order Setting Hearing – Sexual Assault[ ] Order on Motion for Renewal of Sexual Assault Protection Order | ***After a Motion Hearing:***[ ] Order Modifying or Terminating Protection Order[ ] Order to Surrender and Prohibit Weapons |
| ***Other Documents:***[ ][ ][ ][ ] |

**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)*