



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 order immediately to the following law enforcement agency \_\_\_\_\_ (*List the same agency that entered the temporary order, if any*)

This agency shall enter this order 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*):

<b>New Petition</b>	<b>After a Full Hearing</b>
<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 <b>blank</b> Law Enforcement and Confidential Information Form	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Order Transferring Case and Setting Hearing	
<input type="checkbox"/> Declaration/s of: _____	
_____	
_____	
<input type="checkbox"/> Denial Order	
<input type="checkbox"/> Notice to Vulnerable Adult	
<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Reissuance of Temporary Protection Order and Notice of Hearing	

<p><b>Renewals</b></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><b>Motions</b></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><b>Weapons Compliance</b></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><b>After a Motion Hearing</b></p> <p><input type="checkbox"/> Order Modifying or Terminating Protection Order</p> <p><input type="checkbox"/> Order to Surrender and Prohibit Weapons</p>
<p><b>Other Documents</b></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. 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)