

STATE OF WASHINGTON  
KING COUNTY DISTRICT COURT

\_\_\_\_\_  
Petitioner

vs.

\_\_\_\_\_  
Respondent

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 \_\_\_\_\_ (*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*):

<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"/> 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:  <hr/> <input type="checkbox"/> Denial Order <input type="checkbox"/> Notice to Vulnerable Adult	
<b>Renewals</b> <input type="checkbox"/> Motion for Renewal of Protection Order <input type="checkbox"/> Order Setting Hearing on Renewal and Extending Order until Hearing <input type="checkbox"/> Order for Renewal of Order for Protection	<b>Motions</b> <input type="checkbox"/> Motion to Modify or Terminate Protection Order <input type="checkbox"/> Motion for Surrender and Prohibition of Weapons <input type="checkbox"/> Notice of Hearing <input type="checkbox"/> Motion to Realign Parties <input type="checkbox"/> Motion to Set Show Cause Hearing - Contempt <input type="checkbox"/> Order on Hearing - Contempt <input type="checkbox"/> Order re Adequate Cause
<b>Weapons Compliance</b> <input type="checkbox"/> Findings and Order on Review: Weapons Surrender Compliance <input type="checkbox"/> Order on Hearing - Contempt <input type="checkbox"/> A blank Proof of Surrender <input type="checkbox"/> A blank Declaration of Non-Surrender <input type="checkbox"/> Receipt for Surrender Weapons and Concealed Pistol License <input type="checkbox"/> Order to Release Weapons	<b>After a Motion Hearing</b> <input type="checkbox"/> Order Modifying or Terminating Protection Order <input type="checkbox"/> Order to Surrender and Prohibit Weapons
<b>Other Documents</b> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	

**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):

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**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):

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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)*