

<b>BAINBRIDGE ISLAND MUNICIPAL COURT</b> <b>Kitsap County, Washington</b>	<b>Mail: PO Box 151, Rollingbay, WA 98061</b> Location: 10255 NE Valley Rd, Bainbridge Island, WA Phone # 206-842-5641 Fax # 206-842-0316 Email: court@bainbridgewa.gov
_____ Petitioner (Protected Person)      Date of Birth _____  vs. _____ Respondent (Restrained Person)      Date of Birth _____	<b>No.</b>  <b>Proof of Service</b> <b>(RTS)</b>

**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, or an incarcerated respondent.

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 other reply 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: \_\_\_\_\_.

**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 or was undeliverable \_\_\_\_\_.

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*):

<p><b>New Domestic Violence Petition:</b></p> <p><input type="checkbox"/> Petition for Order for Protection</p> <p><input type="checkbox"/> Temporary Order for Protection and Notice of Hearing</p> <p><input type="checkbox"/> Reissuance of Temporary Order for Protection and Notice of Hearing</p> <p><input type="checkbox"/> Order to Surrender Weapons (issued without notice) and Notice of Hearing</p> <p><input type="checkbox"/> Order Transferring Domestic Violence Case and Setting Hearing</p> <p><input type="checkbox"/> Declaration/s of: _____</p> <p><input type="checkbox"/> Denial Order</p>	<p><b>New Vulnerable Adult Petition:</b></p> <p><input type="checkbox"/> Petition for a Vulnerable Adult Order for Protection</p> <p><input type="checkbox"/> Temporary Order for Protection and Notice of Hearing</p> <p><input type="checkbox"/> Reissuance of Temporary Order for Protection and Notice of Hearing</p> <p><input type="checkbox"/> Order to Surrender Weapons (issued without notice) and Notice of Hearing</p> <p><input type="checkbox"/> Notice to Vulnerable Adult</p> <p><input type="checkbox"/> Declaration/s of: _____</p> <p><input type="checkbox"/> Denial Order</p>
<p><b>New Sexual Assault Petition:</b></p> <p><input type="checkbox"/> Petition for a Sexual Assault Protection Order</p> <p><input type="checkbox"/> Temporary Sexual Assault Protection Order and Notice of Hearing</p> <p><input type="checkbox"/> Reissuance of Temporary Sexual Assault Protection Order and Notice of Hearing</p> <p><input type="checkbox"/> Order to Surrender Weapons (issued without notice) and Notice of Hearing</p> <p><input type="checkbox"/> Declaration/s of: _____</p> <p><input type="checkbox"/> Denial Order</p>	<p><b>New Harassment and/or Stalking Petition:</b></p> <p><input type="checkbox"/> Petition for Order for Protection – Harassment and/or Stalking <input type="checkbox"/> Respondent Under Age 18</p> <p><input type="checkbox"/> Temporary Order for Protection and Notice of Hearing <input type="checkbox"/> Respondent Under Age 18</p> <p><input type="checkbox"/> Order to Surrender Weapons (issued without notice) and Notice of Hearing</p> <p><input type="checkbox"/> Declaration/s of: _____</p> <p><input type="checkbox"/> Denial Order</p>

<p><b>After a Full Hearing:</b></p> <p><input type="checkbox"/> Order for Protection</p> <p><input type="checkbox"/> Sexual Assault Protection Order</p> <p><input type="checkbox"/> Order for Protection – Vulnerable Adult</p> <p><input type="checkbox"/> Order for Protection – Harassment  <input type="checkbox"/> Respondent Under Age 18</p> <p><input type="checkbox"/> Order for Protection – Stalking  <input type="checkbox"/> Respondent Under Age 18</p> <p><input type="checkbox"/> Order to Surrender Weapons</p> <p><input type="checkbox"/> Order Realigning Parties and Notice of Hearing</p>	<p><b>Renewals:</b></p> <p><input type="checkbox"/> Petition for Renewal of Order for Protection and Notice of Hearing</p> <p><input type="checkbox"/> Order Setting Hearing on Renewal  <input type="checkbox"/> and Extending Order until Hearing</p> <p><input type="checkbox"/> Ex Parte Temporary Order for Renewal of Order for Protection and Notice of Hearing</p> <p><input type="checkbox"/> Order for Renewal of Order for Protection</p> <hr/> <p><input type="checkbox"/> Motion and Declaration for Renewal of Sexual Assault Protection Order</p> <p><input type="checkbox"/> Order Setting Hearing – Sexual Assault</p> <p><input type="checkbox"/> Order on Motion for Renewal of Sexual Assault Protection Order</p>
<p><b>Motions:</b></p> <p><input type="checkbox"/> Motion to Modify/Terminate Order for Protection</p> <p><input type="checkbox"/> Motion for Surrender of Weapons</p> <p><input type="checkbox"/> Notice of Hearing</p> <p><input type="checkbox"/> Motion to Realign Parties</p>	<p><b>After a Motion Hearing:</b></p> <p><input type="checkbox"/> Order Modifying/Terminating Order for Protection</p> <p><input type="checkbox"/> Order to Surrender 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)*