

**KITSAP COUNTY DISTRICT COURT, STATE OF WASHINGTON**

Petitioner _____ <p style="text-align: center;">vs.</p> Respondent _____	NO.  <b>RETURN OF SERVICE - HARASSMENT</b>
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1. My name is \_\_\_\_\_. I am  a peace officer  18 years of age or older and not the petitioner.
2.  I was unable to make personal service on the respondent.  I have notified the petitioner that respondent was not served.  
 Personal service was attempted on the following date(s): \_\_\_\_\_  
\_\_\_\_\_  
 No service was attempted because \_\_\_\_\_  
\_\_\_\_\_
3.  I served \_\_\_\_\_ with the following documents:  

(name of person served)

<input type="checkbox"/> Temporary Order for Protection/Notice of Hearing	<input type="checkbox"/> Motion to Modify/Terminate Order for Protection
<input type="checkbox"/> Petition for an Order for Protection	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Reissuance of Temporary Order for Protection and Notice of Hearing	_____
<input type="checkbox"/> Order for Protection - Harassment	_____
4. I served these documents on \_\_\_\_\_ at \_\_\_\_\_ at this address:  

(date) (time)

\_\_\_\_\_
5. Other: \_\_\_\_\_

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

DATED \_\_\_\_\_ at \_\_\_\_\_, Washington.

Fees: Service \_\_\_\_\_  
Mileage \_\_\_\_\_  
Total \_\_\_\_\_

\_\_\_\_\_  
Signature of Server  
\_\_\_\_\_  
Law Enforcement Agency

**\*\* ALL APPROPRIATE BOXES/AREAS IN SECTION #3 ON THIS FORM MUST BE CHECKED AND/OR COMPLETED OR IT WILL NOT BE ACCEPTED AS BEING PROPERLY SERVED**