Name, Address & Phone Number (If Attorney filing, type Name, Address & Phone Number)

[] Plaintiff, Pro Se[] Attorney for Plaintiff

IN THE FAMILY COURT OF THE SECOND CIRCUIT STATE OF HAWAI'I

)	FC-D NO
	Plaintiff,)))	STATEMENT OF MAILING; EXHIBITS "1" and "2"
VS.)	
))	
	Respondent.)	

STATEMENT OF MAILING

I REPRESENT THAT I caused one (1) <u>certified</u> copy each of the Complaint for Divorce; Summons to Answer Complaint; Motion for Service by Mail and Affidavit; Order for Service by Mail; and ________, to be mailed by certified or registered mail, return receipt requested, restricted delivery to:

Defendant's Name

Defendant's Address

City, State, Zip Code

At the time of mailing, the receipt attached hereto as Exhibit "1" was postmarked and dated.

Thereafter, the return receipt attached hereto as Exhibit "2" was received.

DATE: _____

CRG-AC-508 (9/17)

EXHIBIT "1"

EXHIBIT "2"