

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

Petitioner(s), Pro Se
 Attorney for Petitioner(s)

IN THE FAMILY COURT OF THE SECOND CIRCUIT
STATE OF HAWAII

In the Matter of Adoption of) FC-A NO. _____
A MALE FEMALE)
Born on:)
A MALE FEMALE) ORDER FOR
Born on:) SERVICE BY MAIL
A MALE FEMALE)
Born on:)
A MALE FEMALE)
Born on:)
by)
)
)
[] the legal spouse of [] and)
)
)
[] the child(ren)'s legal parent)
[] husband and wife [] civil union partners)
[] an unmarried person)
)

Petitioner(s)

ORDER FOR SERVICE BY MAIL

It appearing from the petition/motion and affidavit that service by mail in inappropriate;

IT IS HEREBY ORDERED that a certified copy of the Petition for Adoption, Supporting Affidavit, Notice of Time and Place of Hearing and this Order be mailed by certified mail, postage prepaid, restricted delivery, to the non-consenting parent at his or

her last known address. Actual receipt of the above documents by the non-consenting parent constitutes service as if the non-consenting parent was personally served.

DATE

JUDGE'S SIGNATURE

PRINTED JUDGE'S NAME

Americans with Disabilities Act Notice



If you need an accommodation for a disability when participating in a court program, service, or activity, please contact the ADA Coordinator as soon as possible to allow the court time to provide an accommodation:

Call (808) 244-2855 FAX (808) 244-2932 OR Send an e-mail to: adarequest@courts.hawaii.gov. The court will try to provide, but cannot guarantee, your requested auxiliary aid, service or accommodation.