

STATE OF HAWAI'I FAMILY COURT FIRST CIRCUIT	Case Number FC-____ No. _____
EX PARTE MOTION FOR SERVICE BY MAIL AND POSTING IN LIEU OF PUBLICATION; AFFIDAVIT OF PETITIONER/PLAINTIFF; [] EXHIBITS "A" – " _____"; ORDER [] GRANTING [] DENYING EX PARTE MOTION FOR SERVICE BY MAIL AND POSTING IN LIEU OF PUBLICATION	
_____ Petitioner/Plaintiff, vs. _____ Respondent/Defendant.	

COURT USE ONLY

<input type="checkbox"/> Attorney for Petitioner/Plaintiff	Name: _____
<input type="checkbox"/> Petitioner/Plaintiff Pro Se	Address: _____
	Telephone No.: _____

EX PARTE MOTION FOR SERVICE BY MAIL AND POSTING IN LIEU OF PUBLICATION

I, Petitioner/Plaintiff, move for an order authorizing service of the _____,

this motion, affidavit and order and other appropriate documents herein on Respondent/Defendant at his/her last known address by registered or certified mail, with return receipt requested and a directive to deliver to the addressee only, sending a certified copy of the pleading and process to Respondent's/Defendant's closest known relative (if any can be found), and posting at the courthouse in which said documents are filed, in place of service by publication. This Ex Parte Motion is made pursuant to: 1) Hawai'i Family Court Rules, Rules 4(e)(3) and 10; b) Hawai'i Revised Statutes (HRS) Section (§) 601-13; and/or c) HRS § 580-3(e), and is based on the attached affidavit(s), exhibit(s), files and records herein.

DATE:	PETITIONER/PLAINTIFF
CITY:	STATE:



In accordance with the Americans with Disabilities Act, as amended, and other applicable state and federal laws, if you require accommodation for a disability, please contact the ADA Coordinator at the First Circuit Family Court office by telephone at 954-8200, fax 954-8308, or via email at adarequest@courts.hawaii.gov at least ten (10) days prior to your hearing or appointment date.

Please call the Family Court Service Center at 954-8290 if you have any questions about forms or procedures.

**IN THE FAMILY COURT OF THE FIRST CIRCUIT
STATE OF HAWAI‘I**

)	
)	FC- _____ NO. _____
)	AFFIDAVIT OF PETITIONER/PLAINTIFF;
Petitioner/Plaintiff,)	<input type="checkbox"/> EXHIBITS “A” – “ _____ ”
vs.)	
)	
)	
)	
Respondent/Defendant.)	

AFFIDAVIT OF PETITIONER/PLAINTIFF; EXHIBITS “A” – “ _____ ”

STATE OF HAWAI‘I)	ss.
CITY AND COUNTY OF HONOLULU)	

I, Petitioner/Plaintiff, in the above-entitled action, being first duly sworn on oath, hereby state that:

I. Financial Information: I am impoverished and cannot afford to publish legal notice of this case in the newspaper, as noted below:

- a. My gross monthly income from all sources is: \$ _____. I receive money from: (check all that apply)
 - Job \$ _____
 - Welfare \$ _____
 - Food Stamps \$ _____
 - Unemployment Benefits \$ _____
 - Social Security \$ _____
 - Child Support \$ _____
 - Other: _____ \$ _____

- b. I help to support _____ people in my household, not including myself.

- c. Within the past twelve months, I received money from the following sources: (check all that apply)
 - Business, profession or self-employment \$ _____
 - Rent payments, interest or dividends \$ _____
 - Pensions, investments, annuities, or life insurance \$ _____
 - Gifts or inheritance \$ _____
 - Disability payments, lawsuit damages, etc. \$ _____
 - Other: _____ \$ _____

d. I have a total of \$ _____ in cash, on hand or held by others for me, and/or in my savings, checking, or other type of account.

e. I own the following: (check all that apply)

- House, townhouse, condominium, other real property worth: \$ _____
- Pager, cell phone, computer, etc., worth: \$ _____
- Jewelry worth: \$ _____
- Firearms, collectibles, sports equipment, etc., worth: \$ _____
- Car, van, truck, motorcycle, boat, etc., worth: \$ _____
- Other: _____, worth: \$ _____

f. I owe a total amount of \$ _____ on the following: (check all that apply)

- Mortgage \$ _____
- Credit Cards \$ _____
- Loans \$ _____
- Other: _____ \$ _____

g. Please specify any property and debts, listed in (e) and (f) above, that are located in Hawai'i:

Item	Title	Gross Value	Debt Remaining, if any
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

h. The following factors also affect my ability to pay for publication of legal notice:

- 1. _____
- 2. _____
- 3. _____

II. Due and Diligent Search: After due and diligent search, the whereabouts of the Respondent/Defendant are unknown.

a. The last known address of Respondent/Defendant as of _____ is:

b. On _____, I attempted to have Respondent/Defendant personally served at his/her last known address as noted in (II)(a) above. However, I was unsuccessful, and I have attached the following proof of my attempt(s) to personally serve him/her as Exhibit “_____” (if any).

c. On _____, I mailed, by regular mail, a certified copy of the _____ to Respondent/Defendant at his/her last known address as noted in (II)(a) above, but the Post Office returned it to me stating that:

Respondent/Defendant no longer lived at that address.

it was undeliverable.

The returned envelope is attached as Exhibit “_____.”

d. On _____, I mailed a certified copy of the _____ to Respondent/Defendant, at his/her last known address noted in (II)(a) above, by registered or certified mail, with a return receipt requested and a directive to deliver to addressee only.

My receipt for that mail, and if available, the return receipt and envelope is/are attached as Exhibit(s) “_____.”

e. On _____, I mailed the Post Office a “Request for Change of Address or Boxholder Information Needed for Service of Legal Process,” in an attempt to find Respondent’s/Defendant’s new address.

The Post Office returned said form to me, which I have attached as Exhibit “_____”, indicating it does not have Respondent’s/Defendant’s new address.

f. The name, address, and phone number of Respondent’s/Defendant’s closest known relative(s) is/are below, and I have attached the following proof of my contact with him/her/them as Exhibit “_____”:

I have not found any of Respondent’s/Defendant’s closest known relative(s).

g. The name, address, and phone number of our common friend(s) is/are below, and I have attached the following proof of my contact with him/her/them as Exhibit “_____”:

[] Respondent/Defendant and I do not have any common friend(s).

h. I last saw or had any physical contact with the Respondent/Defendant as follows:

i. The last communication I had with Respondent/Defendant was as follows, e.g., via email, etc.; see Exhibit “_____” (if any):

III. Respondent’s/Defendant’s Current Phone Number: I have made the following efforts to find Respondent’s/Defendant’s current phone number, e.g., via operator assistance, telephone directories, etc.; see Exhibit “_____” (if any):

IV. Respondent’s/Defendant’s Last Known Phone Number: I have made the following calls and/or sent text messages to Respondent’s/Defendant’s last known phone number, which is:

_____ ; see Exhibit “_____” (if any).

V. Current Employment: I have made the following attempts to determine Respondent’s/Defendant’s place of employment, and/or I have made the following efforts to contact Respondent/Defendant via his/her employer, who is:

_____ ; see Exhibit “_____” (if any).

VI. Online and Social Media Research: I have made the following attempts to locate Respondent/Defendant online, e.g., via Google, KnowX, Whitepages, Peoplefinders, Instant Checkmate, Family Tree, Radaris, Facebook, Instagram, Tik Tok, etc.; see Exhibit “_____” (if any):

VII. Other Efforts: I have made the following other efforts to contact or locate Respondent/Defendant; see Exhibit “ _____ ” (if any):

I swear under penalty of perjury that everything I have stated in this affidavit is true and correct to the best of my knowledge, information, and belief. I realize that it is against the law for me to state any lies in this document. I also realize that this is a public document and that the Respondent/Defendant shall be able to read this document.
FURTHER AFFIANT SAYETH NAUGHT.

X _____
Print Name: _____
Petitioner/Plaintiff

Subscribed and sworn to before me this _____ day of _____, 20____.

Date of Document: _____ Number of pages: _____

Document Title: Affidavit of Petitioner/Plaintiff

Signature of Notary Public
State of Hawai‘i, First Circuit
Print Name: _____
My commission expires: _____

EXHIBIT “A”

FC Admin 4/28/21

AFFIDAVIT OF PETITIONER/PLAINTIFF;
EXHIBITS “A” – “___”

EXHIBIT “ _____ ”
(print as many as needed)

Certified copies of the following documents:

(1) _____
_____;

(2) *Ex Parte Motion for Service by Mail and Posting in Lieu of Publication; Affidavit of Petitioner/Plaintiff; [] Exhibits "A"- _____; and Order [] Granting [] Denying Ex Parte Motion for Service by Mail and Posting in Lieu of Publication;*

(3) *Notice of Posting (if applicable);*

(4) *Notice to Attend Kids First (if applicable).*

2. For divorce cases, the Petitioner/Plaintiff shall arrange for the posting of a copy of the pleadings and process at the courthouse in which these documents were filed. For confidential paternity cases, only the *Notice of Posting* form shall be posted at the courthouse in which these documents were filed.
3. Service shall be considered complete thirty (30) days after the date of mailing. By law, the Respondent/Defendant has an additional twenty (20) days after that date to file an answer and/or response.
4. Petitioner/Plaintiff shall attest to the fact of mailing and the date thereof by affidavit or Statement of Mailing, attaching the sender's receipt for that mail as Exhibit 1, and, if available, the return receipt as Exhibit 2, and envelope as Exhibit 3.
5. **Court Hearing: No sooner than fifty (50) days after these documents are mailed to the Respondent/Defendant, Petitioner/Plaintiff shall submit all necessary documents (including the proposed Divorce Decree and Certificate of Service, Petitioner's/Plaintiff's Statement of Mailing and a copy of the Declaration of Posting) to this Court for the setting of a hearing on this matter.**

Dated: Kapolei, Hawai'i, _____

JUDGE OF THE ABOVE-ENTITLED COURT

Print Judge's Name: _____