Name (and Attorney No. if applicable)			
Address			
City, State, Zip Code			
Telephone/Cell Phone Number			
E-Mail Address  [ ] Petitioner, Self-Represented Litigant [ ] Respondent, Self-Represented Litigant [ ] Attorney for: [ ] Petitioner [ ] Responde  IN THE FAMILY COURT OF			
STATE OF HAWAI'I			
[ ] Child Support Enforcement Agency, State of Hawaiʻi,	PROOF OF SERVICE		
[ ] Mother [ ] Father [ ] Caretaker  PETITIONER(S)  v.			
[ ] Mother [ ] Father [ ] Caretaker			
[ ] Mother [ ] Father [ ] Caretaker			
[ ] and Child Support Enforcement Agency, State of Hawai'i,			
RESPONDENT(S).	) )		

## **PROOF OF SERVICE**

I served a certified copy of each document identified on the next page by personal delivery

FC Adm 10/16/20 Page 1 of 2 pages PROOF OF SERVICE 3C-P-453

o the following person(s):					
PERSON(S) SERVED	DATE	TIME	PLACE		
DOCUMENTS SERVED					
Petition for Paternity or for C Establishment of Paternity	ustody, Vis	sitation, an	d Support Orders After Voluntary		
] Summons					
Motion for Relief After Judgment or Order and Declaration; Hearing Scheduling Order					
Amended Hearing Scheduling Order					
Motion and Declaration to Modify Child Support and Attachments  Attachments					
Attachments  Attachment for Information on  Birth Certificate of Child(ren)					
Additional Children					
Paternity Financial Informa			/ Stubs		
☐ Hawaiʻi Paternity Action Inf	formation	∐ Not	tice to Attend Kids First		
☐ Proposed Parenting Plan		LJ			
	n to be serv		ite a due and diligent search, I wan nerefore the attached documents		
OMMENTS:					
OMMENTO.					
PLEASE EXPEDITE RETURN OF SERVICE TO FAMILY COURT					
Date	Signa	ture of l	Server/Sheriff [ ]Police Office		
Print N	lame:				
Badge ID/Nul					
			cipating in a court program, service, or		
	activity, please contact the ADA Coordinator as far in advance as possible to allow time to provide an accommodation at (808) 961-7629, fax (808) 961-7577, or send an e-mail to				
adarequest@courts.hawaii.gov.		00) 901-737	r, or seria an e-mail to		

Please call the Family Court if you have any questions about the forms or procedures: Hilo (808) 961-7500, Kona (808) 443-2112.