STATE OF HAWAI'I FAMILY COURT FIRST CIRCUIT	CASE ID/NUMBER _____

PROOF OF SERVICE

Petitioner,

v.

Respondent.

I served a certified copy of each document identified below to the following person(s):

PERSON(S) SERVED	DATE	TIME	PLACE

DOCUMENT(S) SERVED

☐ PETITION FOR AN ORDER FOR PROTECTION; TEMPORARY RESTRAINING ORDER; NOTICE OF HEARING

☐ AMENDED NOTICE OF HEARING

☐ ORDER FOR PROTECTION

PLEASE EXPEDITE RETURN OF SERVICE TO FAMILY COURT

DATE	POLICE OFFICER/SHERIFF'S SIGNATURE Badge Number: Print Name:	☐ UNSERVED DOCUMENTS: I certify that despite due and diligent search, I was unable to locate the person upon whom service was ordered, and therefore the attached documents are being returned as unserved.

If you need an accommodation for a disability when participating 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: Call the ADA Coordinator of the First Circuit Family Court Office at (808)954-8200, fax (808)954-8308, or send an e-mail to adarequest@courts.hawaii.gov. The ADA Coordinator will work to provide, but cannot guarantee your requested auxiliary aid, service, or accommodation.

*Please call the Family Court TRO Unit at **(808)538-5959** if you have any questions or need an interpreter.*

CLEAR FORM