

\_\_\_\_\_  
Name (and Attorney No. if applicable)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone/Cell Phone Number

\_\_\_\_\_  
E-Mail Address

Self-Represented [ ]Plaintiff [ ]Defendant

Attorney for [ ]Plaintiff [ ]Defendant

IN THE FAMILY COURT OF THE FIRST CIRCUIT

STATE OF HAWAII

) CASE NO.: \_\_\_\_\_  
)

) **PROOF OF SERVICE**  
)

v. PLAINTIFF, )  
)

DEFENDANT. )

**PROOF OF SERVICE**

I served a file-stamped copy of each document identified on the next page by personal delivery to the following person(s):

PERSON(S) SERVED	DATE	TIME	PLACE

**DOCUMENTS SERVED**

[ ] \_\_\_\_\_  
[ ] \_\_\_\_\_  
[ ] \_\_\_\_\_

[ ] **UNSERVED DOCUMENTS:** I certify that, despite due and diligent search, I was unable to locate the person to be served, and therefore the attached documents are being returned as unserved.

**PLEASE EXPEDITE RETURN OF SERVICE TO FAMILY COURT**

\_\_\_\_\_ Date \_\_\_\_\_ Signature of [ ] Server/Sheriff [ ] Police Officer  
Print Name: \_\_\_\_\_  
Badge ID/Number: \_\_\_\_\_



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](mailto: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 Service Center at (808) 954-8290 if you have any questions about forms or procedures.*