

**SUPERIOR COURT OF WASHINGTON
COUNTY OF YAKIMA
JUVENILE COURT**

(School District) Petitioner
vs. _____
Respondent(s)

Student
Student's D.O.B. ____/____/____

Parent(s)

No:

**Return of Service
(RTS)**

(Name of School)

Interpreter ☐ YES ☐ NO

I DECLARE:

1.1 I am over the age of 18 years and not directly involved in the truancy process between this school district and this student.

1.2 I served _____ (Name) with the following documents:

- ☐ Petition Regarding Truancy
- ☐ Supplemental Petition Regarding Truancy
- ☐ Notice of Hearing
- ☐ Order to Stay Truancy Proceedings and Referral
- ☐ Order Lifting Stay and Scheduling Hearing
- ☐ Motion to Set Show Cause Hearing - Contempt
- ☐ Order to Set Show Cause Hearing - Contempt
- ☐ Other: _____

1.3 The date, time and place of service was:

Date: _____ Time: _____ a.m./p.m.

Address: _____

1.4 Service was made:

- ☐ By delivery directly to the person named in paragraph 2 above.
☐ By delivery to _____ (Name), a person of suitable age and discretion residing at the respondent's usual abode.
☐ By certified mail return receipt requested. The copy was mailed on _____.

1.5 Other:

I declare under penalty of perjury under the laws of the state of Washington that the above statement is true and correct.

Signed on _____ at _____, Washington.

Fees:

Service: _____

Mileage: _____

Total: _____

(Attach Return Receipt here, if service was by mail)

Signature

Print name

Address