

PIERCE COUNTY DISTRICT COURT, STATE OF WASHINGTON

<p>_____, Plaintiff(s),</p> <p style="text-align: center;">v.</p> <p>_____, Defendant(s).</p>	<p>CASE NO. _____</p> <p><b>SMALL CLAIMS RETURN OF SERVICE</b></p>
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Defendant(s) was served with the Small Claims Notice of Claim filed in this matter as follows –

- REGISTERED OR CERTIFIED MAIL – RCW 12.40.040; RCW 4.28.080(17). I mailed a copy of the Small Claims Notice of Claim to Defendant(s) by registered or certified mail to the Defendant’s usual mailing address. The return receipt with the signature of the party being served is attached.
- PERSONAL SERVICE – RCW 4.28.080(16). I served a copy of the Small Claims Notice of Claim personally to \_\_\_\_\_  
Date and Time of Service – \_\_\_\_\_  
Location of Service (address, city, state) – \_\_\_\_\_
- SUBSTITUTE SERVICE – RCW 4.28.080(16). I served a copy of the Small Claims Notice of Claim personally to \_\_\_\_\_.  
The service was made (1) at the Defendant(s) usual abode, and (2) to the above person who was of suitable age and discretion, and (3) to the above person who was then a resident at that location.  
Date and Time of Service – \_\_\_\_\_  
Location of Service (address, city, state) – \_\_\_\_\_
- SERVICE ON COMPANY OR CORPORATION – RCW 4.28.080(9). I served a copy of the Small Claims Notice of Claim personally to \_\_\_\_\_,  
who is the president or other head of the company or corporation, the registered agent, secretary, cashier or managing agent, or to the secretary, stenographer or office assistant of the president or other head of the company or corporation, registered agent, secretary, cashier or managing agent.  
Person Served’s Relationship to Business – \_\_\_\_\_  
Date and Time of Service – \_\_\_\_\_  
Location of Service (address, city, state) – \_\_\_\_\_

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

DATE: \_\_\_\_\_

PLACE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME