



**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA  
DOMESTIC VIOLENCE UNIT  
500 INDIANA AVENUE, N.W.  
Room # 4510  
WASHINGTON, D.C. 20001**

\_\_\_\_\_  
**Petitioner**

**vs.**

\_\_\_\_\_  
**Respondent**

**Case No:** \_\_\_\_\_

**Hearing Type:** \_\_\_\_\_

**Hearing Date:** \_\_\_\_\_

## **RETURN OF SERVICE**

CHECK THE DOCUMENTS THAT YOU ARE SERVING AND MARK THE APPROPRIATE BOXES BELOW

- |                                                                              |                                                                         |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Petition and Affidavit for a Civil Protection Order | <input type="checkbox"/> Motion to Modify/Extend Civil Protective Order |
| <input type="checkbox"/> Temporary Protective Order                          | <input type="checkbox"/> Motion to Adjudicate Contempt                  |
| <input type="checkbox"/> Notice of Hearing and Order to Appear               |                                                                         |
| <input type="checkbox"/> Other: _____                                        |                                                                         |

I personally served the above documents on \_\_\_\_\_  
Name of Person

- ☐ Respondent
- ☐ a person of suitable age and discretion who currently resides with Respondent

at \_\_\_\_\_  
( please write full address where service was done or provide detailed description of location.)

on (date) \_\_\_\_\_ at (time) \_\_\_\_\_ a.m./p.m.  
month, date, year

I, \_\_\_\_\_ a competent person over eighteen years of age with no interest in the  
(Please print full name of Server)  
subject matter of this lawsuit, affirm under penalty of perjury that the information in this document is true and correct to the best  
of my knowledge, information and belief.

**Law Enforcement Officer's Badge#** \_\_\_\_\_ **OR** **CAD#** \_\_\_\_\_

\_\_\_\_\_  
**Server's Signature**  
(Person who served the documents)

\_\_\_\_\_  
**Date**

**FAILURE TO COMPLETE THIS FORM IN ITS ENTIRETY COULD CAUSE THE CASE TO BE DELAYED**