| С  | STATE OF HAWAI'I<br>CIRCUIT COURT OF THE<br>CIRCUIT  | RETURN AND ACKNOWLEDGMENT<br>OF SERVICE |                                 | CASE NUMBER                              |  |  |
|--|--|---|---------------------------------|--|--|--|
|  |  |   |                                 |  |  |  |
| DOCUMENTS SERVED:  |  |   |                                 |  |  |  |
| I, Sheriff/Police Officer of the State of Hawai'i do hereby certify that I received a certified copy of the documents listed above and that I served the same on |  |   |                                 |  |  |  |
| on   | (date)   | at(                                     | (time) within t                 | he State of Hawaiʻi as follows:          |  |  |
|  | PERSONAL: By delivering to and leaving with, personally.   |   |                                 |  |  |  |
|  | SUBSTITUTE: [HRCP 4(d) (1) (A)] After due and diligent search and inquiry, I served above-named defendant through, a person of suitable age and discretion then residing at said party's usual place of abode, since the defendant could not be found. |   |                                 |  |  |  |
|  | □ SUBSTITUTE: [HRCP 4(d) (1) (B)] I served above-named defendant through, authorized agent to receive service of process for said defendant.   |   |                                 |  |  |  |
|  | BUSINESS/CORPORATION/GOVERNMENTAL ENTITY: On   |   |                                 |  |  |  |
|  | of said Business/Corporation/C   |   | (postition/title)               |  |  |  |
|  | GARNISHMENT: I served  | who is a                                | uthorized to accept service for | or the above-named garnishee.            |  |  |
| NOT FOUND: After due and diligent search and inquiry, I am unable to find (name of party)  |  |   |                                 |  |  |  |
| Attorne<br>Date:   | y (Name, I.D. No., Address, Phone)<br>Sheriff/Police Officer (1  | type or print) Signatu                  | re                              |  |  |  |
|  | D. 001103 (7/91)   |   |                                 | I AND ACKNOWLEDGMENT OF SERVICE 1C-P-022 |  |  |

| SUBSCRIBED AND SWORN<br>TO BEFORE ME THIS DATE: | NOTARY PUBLIC'S SIGNATURE: | MY COMMISSION EXPIRES: |
|---|----------------------------|------------------------|
| IN, HAWAIʻI                                     | STATE OF HAWAI'I           |                        |

## ACKNOWLEDGMENT OF SERVICE

(signature of person served)

(date)

(time)