

Case No. \_\_\_\_\_

\_\_\_\_\_  
(Name of person who filed the Petition)

and

\_\_\_\_\_  
(Name of person who did not file the Petition)

**REQUEST AND SERVICE INSTRUCTION FORM**

*“Petitioner” means the person who filed the Petition (the first document in the case).*

*“Respondent” means the person who did not file the Petition.*

To: Clerk of the District Court - the following forms are filed for service:  
(check all applicable forms to be served)

- 1. Motion to Modify Child Support and Notice of Hearing
- 2. Child Support Worksheet
- 3. Short Form Domestic Relations Affidavit of  Petitioner  Respondent
- 4. Motion to Establish Parenting Time and Notice of Hearing
- 5. Motion to Enforce Parenting Time and Notice of Hearing
- 6. Motion to Modify Parenting Time and Notice of Hearing
- 7. UCCJEA Affidavit
- 8. Proposed Parenting Plan of  Petitioner  Respondent
- 9. Other \_\_\_\_\_ (name of form to be served)

Name of person to be served: \_\_\_\_\_

(You must complete one request for **EACH** person to be served.)

Address of person to be served: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Service is requested by **ONE** of the following methods:

- a. *Service by U.S. Mail* – I mailed (postage pre-paid) the documents to the other person’s last known address.
- b. *Service by Certified Mail* – I mailed the documents by certified mail, and I understand that I must file the receipt for certified mail service (green card or electronic confirmation) with the Clerk’s office.

- c. *Service by Sheriff by Certified Mail* - Certified mail service by the office of the Sheriff of \_\_\_\_\_ County, State of Kansas. I understand that the responsibility for obtaining service and filing the return of service shall be on the Sheriff.
- d. *Personal Service by Sheriff (inside Kansas)*- Personal service through the office of the Sheriff of \_\_\_\_\_ County, State of Kansas.
- e. *Personal Service by Sheriff (outside Kansas)* – Personal service through the office of the Sheriff of \_\_\_\_\_ County, State of \_\_\_\_\_, which I MUST ARRANGE WITHOUT ASSISTANCE OF THE COURT.

X \_\_\_\_\_  
Signature

Name (Print): \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_