

**PROTECTION ORDER – DOMESTIC VIOLENCE  
RETURN OF SERVICE**

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

\_\_\_\_\_,  
(Name) **Applicant,**

IN THE JUSTICE COURT OF \_\_\_\_\_ TOWNSHIP  
COUNTY OF \_\_\_\_\_, STATE OF NEVADA

*OR*

VS.

IN THE \_\_\_\_\_ JUDICIAL DISTRICT COURT  
OF THE STATE OF NEVADA, IN AND FOR THE  
COUNTY OF \_\_\_\_\_

\_\_\_\_\_,  
(Name) **Adverse Party.**

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**TYPE OF ORDER SERVED**

USE SEPARATE *RETURN OF SERVICE* FORM FOR PROTECTION ORDERS OTHER THAN DOMESTIC VIOLENCE

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The Order shall be served by the constable OR by a deputy; OR by the sheriff of the county where the defendant is found, OR by a deputy, OR by any person who is not a party and who is over 18 years of age.

I HEREBY CERTIFY THAT ON \_\_\_\_\_ I RECEIVED:  
(DATE)

- Temporary Protection Order–Domestic Violence                       Extended Protection Order-Domestic Violence
- Motion/Notice for Hearing - Domestic Violence Protection Order
- Order for Hearing to Extend, Modify or Dissolve Domestic Violence-Protection Order
- Foreign Order (describe in terms of State/County/City & Court Issued from):
- Other (describe): \_\_\_\_\_

**I DECLARE UNDER PENALTY OF PERJURY THAT I:**

- PERSONALLY SERVED** the same upon the Adverse Party/Applicant \_\_\_\_\_,  
(Name)  
on \_\_\_\_\_ at \_\_\_\_\_, who identified himself/herself by or with: \_\_\_\_\_,  
(Date) (Time) (Type of Identification)  
at (location): \_\_\_\_\_,  
City of \_\_\_\_\_, County of \_\_\_\_\_, State of Nevada.

**NOTE TO LAW ENFORCEMENT: Protection Order must be served personally upon the Adverse Party and may not be left with a member of the household.**

- INFORMED THE ADVERSE PARTY** of the specific terms and conditions of the Order, and that a violation of the Order will result in his/her arrest; the location of the Court that issued the Order and the hours during which he/she may obtain a copy of the Order; and the date and time set for hearing.
- ATTEMPTED TO SERVE** same on: \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_.  
The Adverse Party/Applicant was not found and service was NOT effected.

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**SIGNATURE (Officer/Person Serving Order/ID Number)**

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**Print Name (Officer/Person Serving Order)**

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**Print Address (Officer/Person Serving Order)**

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**SIGNATURE (Adverse Party/Witness, if applicable)**

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**Print Name and Address (Adverse Party/Witness)**