

[X] EXPEDITE (if filed within 5 days of Hearing)
[X] Hearing is Set (time sensitive emergency XP)
Date: 3-1-24 Rm. 269
Time: 3:30pm ZOOM #:884-1439-7681 passcode 269
Commissioner/Calendar: Fleischbein / Emergency Ex Pare Motion

FILED

MAR 01 2024

KITSAP COUNTY CLERK
DAVID T. LEWIS III

Superior Court of Washington, County of KITSAP

In re:

Petitioner/s *(person/s who started this case)*:

Wood, Heather

And Respondent/s *(other party/parties)*:

Feulner, Lenard

No. 07-3-01713-1

Proof of Mailing or Hand Delivery
(for documents after Summons and Petition)
(AFSR)

**Proof of Mailing or Hand Delivery
(for documents after Summons and Petition)**

I, Heather Wood, declare:

1. I am *(check one)*: [X] the Petitioner and am competent to be a witness in this case.
2. On *(date)*: 3/1/2024, I served copies of the documents listed in **3** below to
(name of party or lawyer served): Lenard Feulner, Adeline Feulner, Kerry Stevens, Nancy Tarbell, Hauer, by:
☐ email to *(address)*: lenardfeulner@gmail.com, adelinewolfpaw@gmail.com, SLO@wavecable.com, Nancy@tarbelllaw.com, mhauer@kitsap.gov.

3. List all documents you served *(check all that apply)*:

(The most common documents are listed below. Check only those documents that were served. Use the "Other" boxes to write in the title of each document you served that is not already listed.)

<input type="checkbox"/> Notice of Hearing	<input type="checkbox"/> Notice Re Military Dependent
<input type="checkbox"/> Motion for Temporary Family Law Order <input type="checkbox"/> and Restraining Order	[X] Sealed cover sheet for Wood's Medical Records.
<input type="checkbox"/> Proposed Temporary Family Law Order	<input type="checkbox"/> Financial Declaration
<input type="checkbox"/> Proposed Parenting Plan	<input type="checkbox"/> Declaration of: _____



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<input type="checkbox"/> Proposed Child Support Order	<input type="checkbox"/> Declaration of: _____
<input type="checkbox"/> Proposed Child Support Worksheets	<input type="checkbox"/> Declaration of: _____
[X] Other: <u>Proof of Service</u>	[X] Other: <u>Motion for Continuance</u>
[X] Other: <u>Notice of Hearing</u>	[X] Other: <u>Notice of Disqualification</u>
[X] Other: <u>Medical FMLA Dr.s Care</u>	[X] Other: <u>Objection to Join Petition De Novo to defunct, withdrawn petition.</u>

4. Other: _____

I declare under penalty of perjury under the laws of the state of Washington that the statements on this form are true.

Signed at (city and state): Rochester, Wa

Date: March 1, 2024



Signature of server

Heather Wood
Print or type name of server