U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN See "Instructions for Service of Process by U.S. Marshal"

Doc. 37 Att. 2

PLAINTIFF Plaintiff's Name DEFENDANT Defendant's Name (add "et al.," if more than one defendant)			COURT CASE NUMBER CV (your case number) TYPE OF PROCESS Summons/Complaint/Order					
					NAME OF INDI	VIDUAL, COM	PANY, COR	PORATION, ETC
SERVE Name of de	efendant to	be serve	ed					
			ty, State and ZIP C	Code)				
Complete	address of	defendar	nt to be serv	ed (where the	defen	dant actually li	ves or work	ks)
END NOTICE OF SERVICE COP	Y TO REQUES	TER AT NAM	ME AND ADDRE	SS BELOW		ber of process to be	1	
						ber of parties to be	number oj	f defenda
Plaintij	f's comple	te addres	5 S		Serve	ed in this case		
					Chec on U	k for service .S.A.		
SPECIAL INSTRUCTIONS OR OT	HER INFORM	ATION THA	T WILL ASSIST	IN EXPEDITING SE	RVICE (I	nclude Business and A	lternate Addres	ses.
All Telephone Numbers, and Estim								-
								Fold
					,			
								•
						2.3		
·			· · · · · · · · · · · · · · · · · · ·					
ignature of Attorney other Originate	or requesting ser	vice on behal	f of:	PLAINTIFF	TELEPHO	NE NUMBER	DATE	
	or requesting ser	vice on behal		PLAINTIFF DEFENDANT	TELEPHO	NE NUMBER	DATE Date sign	ed
Sign your name here				DEFENDANT	·		Date sign	
Sign your name here SPACE BELOW FOR	R USE OF	U.S. MA	CRSHAL O	DEFENDANT NLY DO NO	T WI	RITE BELOW	Date sign	NE
Sign your name here SPACE BELOW FOR acknowledge receipt for the total number of process indicated.				DEFENDANT	T WI	RITE BELOW	Date sign	NE
Sign your name here SPACE BELOW FOR acknowledge receipt for the total	R USE OF	U.S. MA	ARSHAL O	DEFENDANT NLY DO NO	T WI	RITE BELOW	Date sign	NE
Sign your name here SPACE BELOW FOF acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more han one USM 285 is submitted)	Total Process	U.S. MA District of Origin No	District to Serve	DEFENDANT NLY DO NC Signature of Author	OT WI	RITE BELOW IS Deputy or Clerk	THIS LIT	NE
Sign your name here SPACE BELOW FOF acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more an one USM 285 is submitted) hereby certify and return that I	Total Process	U.S. MA District of Origin No served , h	District to Serve No	DEFENDANT NLY DO NC Signature of Author e of service, have	DT WI	RITE BELOW IS Deputy or Clerk as shown in "Remarks	THIS LIP Date ", the process de	NE scribed
Sign your name here SPACE BELOW FOF acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more han one USM 285 is submitted) hereby certify and return that I n the individual, company, corporation.	Total Process have personally tion, etc., at the	U.S. MA District of Origin No served ,□ haddress shown	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	DT WI	AS Deputy or Clerk as shown in "Remarks rotation, etc. shown at the	THIS LIP Date ", the process de	NE scribed
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more han one USM 285 is submitted) hereby certify and return that I I hereby certify and return that I	Total Process have personally tion, etc., at the am unable to lo	U.S. MA District of Origin No served , haddress shown cate the indiv	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	DT WI	AS Deputy or Clerk as shown in "Remarks pration, etc. shown at the	THIS LIP Date ", the process dee address inserte	scribed ed below.
Sign your name here SPACE BELOW FOF acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more nam one USM 285 is submitted) hereby certify and return that I in the individual, company, corporati	Total Process have personally tion, etc., at the am unable to lo	U.S. MA District of Origin No served , haddress shown cate the indiv	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	DT WI	AS Deputy or Clerk as shown in "Remarks rotation, etc. shown at the	Date sign THIS LIP Date ", the process dee address inserte able age and disc	escribed ed below.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more nan one USM 285 is submitted) Thereby certify and return that I not be individual, company, corporated in the individual in the individual served (in the individual served (i	Total Process have personally tion, etc., at the am unable to lo	U.S. MA District of Origin No served , haddress shown cate the indiv	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	DT WI	as shown in "Remarks ration, etc. shown at the remarks below) A person of suite then residing in a	Date sign THIS LIP Date ", the process dee address inserte able age and disc	escribed ed below.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more ian one USM 285 is submitted) hereby certify and return that I I hereby certify and return that I	Total Process have personally tion, etc., at the am unable to lo	U.S. MA District of Origin No served , haddress shown cate the indiv	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	DT WI	as shown in "Remarks pration, etc. shown at the residing in of abode	Date sign THIS LIT Date ", the process de e address inserte able age and disc defendant's usua	escribed ed below.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total number of process indicated. Sign only for USM 285 if more nan one USM 285 is submitted) Thereby certify and return that I not be individual, company, corporation in the individual of individual served (in the indivi	Total Process have personally tion, etc., at the am unable to lo	U.S. MA District of Origin No served , haddress shown cate the indiv	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	DT WI	as shown in "Remarks pration, etc. shown at the residing in of abode	Date sign THIS LIT Date ", the process dee address inserte table age and disc defendant's usua	escribed de below.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more nan one USM 285 is submitted) Thereby certify and return that I not be individual, company, corporated in the individual in the individual served (in the individual served (i	Total Process have personally tion, etc., at the am unable to lo	U.S. MA District of Origin No served , haddress shown cate the indiv	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	DT WI	as shown in "Remarks bration, etc. shown at the residing in of abode Date	Date sign THIS LIT Date ", the process dee address inserte table age and disc defendant's usua	escribed de delow.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more nan one USM 285 is submitted) hereby certify and return that I I hereby certify and return that I I hereby certify and return that I Address (complete only different than	Total Process have personally tion, etc., at the arm unable to lo if not shown above	U.S. MA District of Origin No served ,□ h address shown cate the indiv	District to Serve No	PLAINTIFF DEFENDANT NLY DO NC Signature of Author e of service, have the individual, compare the orporation, etc. named	executed above (S	as shown in "Remarks pration, etc. shown at the remarks below) A person of suitathen residing in of abode Date Signature of U.S. Ma	Date sign THIS LIT Date ", the process de e address inserte able age and disc defendant's usua Time	escribed de delow.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more nan one USM 285 is submitted) thereby certify and return that I the individual, company, corporation I hereby certify and return that I ame and title of individual served (individual) individual served (individual)	have personally tion, etc., at the am unable to low front shown above)	U.S. MA District of Origin No served ,□ h address shown cate the indiv	District to Serve No	DEFENDANT NLY DO NO Signature of Author e of service, have the individual, compa	executed above (S	as shown in "Remarks bration, etc. shown at the residing in of abode Date	Date sign THIS LIT Date ", the process de e address inserte able age and disc defendant's usua Time	escribed de below.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more tan one USM 285 is submitted) thereby certify and return that I I hereby certify and return that I ame and title of individual served (in ddress (complete only different than ervice Fee Total Mileage Ch	have personally tion, etc., at the am unable to low front shown above)	U.S. MA District of Origin No served ,□ h address shown cate the indiv	District to Serve No	PLAINTIFF DEFENDANT NLY DO NC Signature of Author e of service, have the individual, compare the orporation, etc. named	executed above (S	as shown in "Remarks pration, etc. shown at the residing in cof abode Date Signature of U.S. Marsha	Date sign THIS LIT Date ", the process de e address inserte able age and disc defendant's usua Time	escribed de below.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total umber of process indicated. Sign only for USM 285 if more uan one USM 285 is submitted) hereby certify and return that I in the individual, company, corporat I hereby certify and return that I ame and title of individual served (individual served (individual)) ddress (complete only different than ervice Fee Total Mileage Chincluding endeavents.	have personally tion, etc., at the am unable to low front shown above)	U.S. MA District of Origin No served ,□ h address shown cate the indiv	District to Serve No	PLAINTIFF DEFENDANT NLY DO NC Signature of Author e of service, have the individual, compare the orporation, etc. named	executed above (S	as shown in "Remarks pration, etc. shown at the residing in cof abode Date Signature of U.S. Marsha	Date sign THIS LIT Date ", the process de e address inserte able age and disc defendant's usua Time	escribed de below.
Sign your name here SPACE BELOW FOR acknowledge receipt for the total amber of process indicated. Sign only for USM 285 if more an one USM 285 is submitted) thereby certify and return that I I hereby certify and return that I ame and title of individual served (in ddress (complete only different than ervice Fee Total Mileage Ch	have personally tion, etc., at the am unable to low front shown above)	U.S. MA District of Origin No served ,□ h address shown cate the indiv	District to Serve No	PLAINTIFF DEFENDANT NLY DO NC Signature of Author e of service, have the individual, compare the orporation, etc. named	executed above (S	as shown in "Remarks pration, etc. shown at the residing in cof abode Date Signature of U.S. Marsha	Date sign THIS LIT Date ", the process de e address inserte able age and disc defendant's usua Time	escribed de below.

PRIOR EDITIONS MAY BE USED

AO 398 (Rev. 01/09) Notice of a Lawsuit and Request to Waive Service of a Summons

UNITED STATES DISTRICT COURT

for the
District of Arizona

Distr	rict of Arizona
Plaintiff's Name Plaintiff v. Defendant's Name - add "et al." if more than one Defendant NOTICE OF A LAWSUIT AND REQU)) Civil Action No. (CV - Case number)) EST TO WAIVE SERVICE OF A SUMMONS
To: (Name of Defendant or Agent of Corpoerate Defendant	t - List only one defendant per notice)
(Name of the defendant or - if the defendant is a corporation, pa	rtnership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the entity A copy of the complaint is attached.	y you represent, in this court under the number shown above.
waiver within days (give at least 30 days, or at least 60 d	the court. It is a request that, to avoid expenses, you waive formal sed waiver. To avoid these expenses, you must return the signed days if the defendant is outside any judicial district of the United States) was sent. Two copies of the waiver form are enclosed, along with ms for returning one copy. You may keep the other copy.
What happens next?	
on the date the waiver is filed, but no summons will be se	the court. The action will then proceed as if you had been served erved on you and you will have 60 days from the date this notice 0 days if this notice is sent to you outside any judicial district of
If you do not return the signed waiver within the t served on you. And I will ask the court to require you, or	ime indicated, I will arrange to have the summons and complaint the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the duty	to avoid unnecessary expenses.
I certify that this request is being sent to you on t	
	dute below.
Date: (Leave blank)	(Sign your name)
	Signature of the attorney or unrepresented party
	Printed name
	Address
	E-mail address
	Telephone number

U.S. Department of Justice

PROCESS RECEIPT AND RETURN

United States Marshals Service See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	TIFF				COURT CASE NUMBER		
DEFENDANT	FENDANT				TYPE OF PROCESS		
SERVE J			ORPORATION. ET		CCRIPTION OF PROPERTY	TO SEIZE OR CONDEMN	
SEND NOTICE OF SERVICE	E COPY TO REQ	JESTER AT NA	AME AND ADDR	ESS BELOW	Number of process to be served with this Form 28:	5	
					Number of parties to be served in this case		
					Check for service on U.S.A.		
SPACE BELOW I acknowledge receipt for the tnumber of process indicated. (Sign only for USM 285 if mor	FOR USE (otal Total Proce	OF U.S. M	ARSHAL O	DNLY DO NO	TELEPHONE NUMBER OT WRITE BELOV ized USMS Deputy or Clerk	W THIS LINE Date	
SPACE BELOW I acknowledge receipt for the t number of process indicated. (Sign only for USM 285 if mor than one USM 285 is submitted. I hereby certify and return that on the individual, company, company, company, company, company, company, company, company.	FOR USE (otal Total Proce e d) I have person orporation, etc., at	District of Origin No ally served , □ the address sho	ARSHAL C f District to Serve No have legal evidence with above on the or	DNLY DO NO Signature of Author ce of service, have the individual, compa	DT WRITE BELOVized USMS Deputy or Clerk executed as shown in "Remany, corporation, etc. shown at	Date Date prks", the process described	
SPACE BELOW I acknowledge receipt for the t number of process indicated. (Sign only for USM 285 if mor than one USM 285 is submitted. I hereby certify and return that on the individual, company, company, company.	FOR USE (otal Total Proceed) I have personorporation, etc., at an that I am unable	DF U.S. M ess District of Origin No ally served , the address sho to locate the ind	ARSHAL C f District to Serve No have legal evidence with above on the or	DNLY DO NO Signature of Author ce of service, have the individual, compa	executed as shown in "Remany, corporation, etc. shown at above (See remarks below) A person of st	Date Date prks", the process described	
SPACE BELOW I acknowledge receipt for the t number of process indicated. (Sign only for USM 285 if mor than one USM 285 is submitted I hereby certify and return that on the individual, company, co I hereby certify and return Name and title of individual se	FOR USE (otal Total Proce e d) I have person orporation, etc., at a that I am unable erved (if not shown	District of Origin No ally served , the address sho to locate the ind above)	ARSHAL C f District to Serve No have legal evidence with above on the or	DNLY DO NO Signature of Author ce of service, have the individual, compa	executed as shown in "Remany, corporation, etc. shown at above (See remarks below) A person of so then residing	Date Date prks", the process described the address inserted below. Date	
SPACE BELOW I acknowledge receipt for the t number of process indicated. (Sign only for USM 285 if mor than one USM 285 is submitted I hereby certify and return that on the individual, company, co I hereby certify and return Name and title of individual se	FOR USE (otal Total Proce e d) I have person orporation, etc., at a that I am unable erved (if not shown	District of Origin No ally served , the address sho to locate the ind above)	ARSHAL C f District to Serve No have legal evidence with above on the or	DNLY DO NO Signature of Author ce of service, have the individual, compa	executed as shown in "Remany, corporation, etc. shown at above (See remarks below) A person of sthen residing of abode Date	Date Date Date rks", the process described the address inserted below. uitable age and discretion in defendant's usual place Time	
I acknowledge receipt for the t number of process indicated. (Sign only for USM 285 if mor than one USM 285 is submitted. I hereby certify and return that on the individual, company, column I hereby certify and return Name and title of individual see. Address (complete only different number of process of the complete only different number of process indicated.	FOR USE (otal Total Proceed) I have person proporation, etc., at a that I am unable erved (if not shown about than shown about than shown about than shown about the street of the shown about the street of the shown about the street of the shown about t	District of Origin No ally served , the address sho to locate the ind above)	ARSHAL C f District to Serve No have legal evidence with above on the or	DNLY DO NO Signature of Author ce of service, have the individual, compa	executed as shown in "Remany, corporation, etc. shown at above (See remarks below) A person of sthen residing of abode Date	Date Date Date rks", the process described the address inserted below. Date Date Time Time Date	

PRINT 5 COPIES:

- 1. CLERK OF THE COURT
- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

United States District Court

	for the
	District of
Plaintiff v.)) Civil Action No.
Defendant)
NOTICE OF A LAWSUIT AND REQU	UEST TO WAIVE SERVICE OF A SUMMONS
To:	
(Name of the defendant or - if the defendant is a corporation, p	partnership, or association - an officer or agent authorized to receive service)
Why are you getting this?	
A lawsuit has been filed against you, or the enti- A copy of the complaint is attached.	ity you represent, in this court under the number shown above.
service of a summons by signing and returning the enclowaiver within days (give at least 30 days, or at least 60 from the date shown below, which is the date this notice	osed waiver. To avoid these expenses, you must return the signed days if the defendant is outside any judicial district of the United States) was sent. Two copies of the waiver form are enclosed, along with cans for returning one copy. You may keep the other copy.
What happens next?	
on the date the waiver is filed, but no summons will be	n the court. The action will then proceed as if you had been served served on you and you will have 60 days from the date this notice 90 days if this notice is sent to you outside any judicial district of
	e time indicated, I will arrange to have the summons and complaint or the entity you represent, to pay the expenses of making service.
Please read the enclosed statement about the du	ity to avoid unnecessary expenses.
I certify that this request is being sent to you or	n the date below.
D.	
Date:	Signature of the attorney or unrepresented party
	Printed name
	Address
	
	E-mail address
	Telephone number

(For Use In Civil Cases With District Judge as Presider)

UNITED STATES DISTRICT COURT

Dis	strict of	
Plaintiff		AND ORDER OF REFERENCE- ICTION BY A UNITED STATES E
V.	Case Number:	
Defendant		
	ITY OF A UNITED STATES MAGIST EXERCISE JURISDICTION	RATE JUDGE
judge of this district court is available to conduct ar of a final judgment. Exercise of this jurisdiction b You may, without adverse substantive co	y a magistrate judge is, however, permitted only it nsequences, withhold your consent, but this will p	nonjury trial, and to order the entry fall parties voluntarily consent. revent the court's jurisdiction from
being exercised by a magistrate judge. If any party not be communicated to any magistrate judge or to		
An appeal from a judgment entered by a judicial circuit in the same manner as an appeal from	magistrate judge shall be taken directly to the Unom any other judgment of a district court.	ited States court of appeals for this
CONSENT TO THE EXERCISE OF J	URISDICTION BY A UNITED STATE	ES MAGISTRATE JUDGE
In accordance with the provisions of 28 U have a United States magistrate judge conduct any judgment, and conduct all post-judgment proceedi		
Signatures	Party Represented	Date
	ORDER OF ASSIGNMENT	
IT IS HEREBY ORDERED that this cas	se be assigned to	
United States Magistrate Judge, for all further proc 73 and the foregoing consent of the parties. A		
Date	United States District Judge	

NOTE: RETURN THIS FORM TO THE CLERK OF THE COURT <u>ONLY IF</u> ALL PARTIES HAVE CONSENTED <u>ON THIS</u> <u>FORM</u> TO THE EXERCISE OF JURISDICTION BY A UNITED STATES MAGISTRATE JUDGE.