UNITED STATES DISTRICT COURT Eastern District of California

Office of the Clerk 501 I Street Suite 4-200 Sacramento, California 95814

Marianne Matherly Clerk

**REPLY TO:** Divisional Office

2500 Tulare Street, Room 1501 Fresno, California 93721 559/499-5600

## **INSTRUCTIONS FOR SERVICE OF SOCIAL SECURITY APPEALS**

The court has issued an order granting your application to proceed without prepayment of fees and directing that service of process be made by the United States Marshal. You must provide the clerk's office with the following:

- 1. The original Summons and five (5) copies of the Summons
- 2. Five (5) copies of the Order directing service by the U.S. Marshal
- 3. Five (5) copies of the Complaint
- 4. One completed USM-285 form addressed to the Social Security Administration
- 5. Five (5) copies of any other documents to be served

The original Summons and one copy of the service order is for the U.S. Marshal Service. The original Summons will be filed with the court following the service of a copy of the Summons and Complaint on the defendant(s). One set of documents (Summons, Complaint, Service Order and any additional documents) will be served on the U.S. Attorney, one set will be served on the Commissioner of Social Security, two sets will be served on the U.S. Attorney General, and one set will be retained by the U.S. Marshal Service. Please include an additional set of documents and a USM-285 form for any additional Federal employee or agency who is named as a defendant in your action.

> OFFICE OF THE CLERK United States District Court Eastern District of California

## IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF CALIFORNIA

Case No.

NOTICE OF SUBMISSION

SOCIAL SECURITY APPEAL

OF DOCUMENTS IN

Plaintiff,

\_\_\_\_\_ /

vs.

COMMISSIONER OF SOCIAL SECURITY,

Defendant.

\_\_\_\_\_ /

Plaintiff hereby submits the following documents in compliance with the court's order filed \_\_\_\_\_\_.

□ 1 completed USM-285 form

- □ 5 copies of the complaint
- □ 1 original Summons and 5 copies of the Summons
- 5 copies of the order directing service by the
   U.S. Marshal
- □ 5 copies of other documents to be served:

DATED:

Signature of Plaintiff

TO BE COMPLETED BY THE CLERK:

Documents forwarded to U.S. Marshal on: \_\_\_\_\_

(Date) (Initials)

## **PROCESS RECEIPT AND RETURN**

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

DEFENDANT  TYPE OF PROCESS  SERVE  NAME OF INDIVIDUAL, COMPANY, CORPORATION, FIC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEL  SERVE  ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  Check for service  Check f	PLAINTIFF							COURT CASE NUMB	ER	
SERVE AT       ADDRESS (Street or RPD, Apartment No., Ciry, State and ZIP Code)         SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW       Number of process to be served with this Form 285         SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW       Number of parties to be served with this Form 285         Served in this case       Check for service on U.S.A.         SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresser, All Telephone Numbers, and Estimated Times Available for Service):       DEFENDANT         Signature of Autorney other Originator requesting service on behalf of:       PLAINTIFF       TELEPHONE NUMBER       DATE         Signature of Autorney other Originator requesting service on behalf of:       PLAINTIFF       TELEPHONE NUMBER       DATE         I acknowledge receipt for the total more process indicated Times Available for Service):       No.       No.       Date         I acknowledge receipt for the total more process indicated Total Process Originator       District to Signature of Autorized USMS Deputy or Clerk.       Date         No.       No.       No.       No.       Date         I thereby certify and return that 1 an unable to locate the individual, company, corporation, etc. shown at the address incerted below of follower (See remarks", the process describe on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc., at the address shown above on	DEFENDANT	ENDANT						TYPE OF PROCESS		
AT ADDRESS (Street or RFD, Apartment No., City, State and ZP Code) SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Served with this Form 285 Served Served (Served With Served Control Served Serv		- NAME OF INDI	VIDUAL, COM	IPANY, COI	RPORATION. ET	C. TO SERVE OR D	ESCRIPTIO	ON OF PROPERTY TO	) SEIZE (	OR CONDEMI
Atomic of process of the served with this Form 285         Served with this Form 285         Number of parties to be served in this case         Check for service on U.S.A.         SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, and Telephone Numbers, and Estimated Times Available for Service):         Signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF         TELEPHONE NUMBER       DATE         Signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF         TELEPHONE NUMBER       DATE         Signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF         TELEPHONE NUMBER       DATE         Signature of Attorney other Originator requesting service on behalf of:       Signature of Attorney other Originator requesting service on behalf of:         Signature of Attorney other Originator requesting service on behalf of:       No.       DEFENDANT         Isknowledge receipt for the total       Total Process       District of Serve       Signature of Authorized USMS Deputy or Clerk       Date         Isign ontry or USM 285 is submitted)       No.       No.       No.       Serve       Signature of Authorized USMS Deputy or Clerk       Date         Isign of the total       Total Process shown above on the on the individual, company, corporation, etc. show		ADDRESS (Stree	et or RFD, Apar	tment No., C	ity, State and ZIP	Code)				
served in this case       Check for service on U.S.A.         SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses. All Telephone Numbers, and Estimated Times Available for Service):       TELEPHONE NUMBER       DATE         Signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF       TELEPHONE NUMBER       DATE         SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE acknowledge receipt for the total number of process indicated. Signature of Autorized USMS Deputy or Clerk       Date       Date	SEND NOTICE	OF SERVICE COP	Y TO REQUES	TER AT NA	ME AND ADDR	ESS BELOW				
special intervention of Attorney other Originator requesting service on behalf of:       PLAINTIFF       DATE         signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF       DEFENDANT       DATE         signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF       DEFENDANT       DATE         signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF       DEFENDANT       DATE         signature of Attorney other Originator requesting service on behalf of:       Service Signature of Authorized USMS Deputy or Clerk       Date         acknowledge receipt for the total tumber of process indicated.       Total Process       District of Origin       District to Signature of Authorized USMS Deputy or Clerk       Date         hereby certify and return that I       have personally served    have legal evidence of service.       have executed as shown in "Remarks", the process describe on the individual, company, corporation, etc., at the address shown above?       Image: Signature of US. Marshal or Deputy         Name and title of individual served (if not shown above)       Date       Time       Signature of US. Marshal or Deputy         Valdress (complete only different than shown above)       Date       Time       Signature of US. Marshal or Deputy         Signature of US. Marshal or Deputy       Fortal Mileage Charges       Forwarding Fee       Total Charges       Advance Deposits <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>-</td><td></td><td></td></t<>								-		
All Telephone Numbers, and Estimated Times Available for Service):          Signature of Attorney other Originator requesting service on behalf of:       PLAINTIFF       DEFENDANT       DATE         SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT WRITE BELOW THIS LINE       Date       Date         tacknowledge receipt for the total number of process indicated.       Total Process       District of Origin       District to Origin       Service       Signature of Authorized USMS Deputy or Clerk       Date         tacknowledge receipt for the total number of process indicated.       No.       No.       No.       No.       No.       Date         It needby certify and return that I       have personally served.       have legal evidence of service.       have executed as shown in "Remarks", the process describe on the individual , company, corporation, etc. named above (See remarks below)         Name and title of individual served (if not shown above)       Date       Time         Signature of U.S. Marshal or Deputy       Signature of U.S. Marshal or Deputy       Signature of abode         Address (complete only different than shown above)       Time       Signature of Advance Deposits       Advance Deposits         Service Fee       Total Mileage Charges       Forwarding Fee       Total Charges       Advance Deposits       Amount owed to U.S. Marshal* or (Amount of Refund*)		-								
han one USM 285 is submitted) No No	-									Fo
on the individual , company, corporation, etc., at the address shown above on the on the individual , company, corporation, etc. shown at the address inserted belog         I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)         Name and title of individual served (if not shown above)       A person of suitable age and discretion then residing in defendant's usual place of abode         Address (complete only different than shown above)       Date       Time         Service Fee       Total Mileage Charges including endeavors)       Forwarding Fee       Total Charges       Advance Deposits       Amount owed to U.S. Marshal* or (Amount of Refund*)	SPACE B acknowledge re number of proces	BELOW FOR seceipt for the total ss indicated.	R USE OF	U.S. M.	ARSHAL O	DEFENDANT	OT WI	RITE BELOW		LINE
Name and title of individual served (if not shown above) <ul> <li>A person of suitable age and discretion then residing in defendant's usual place of abode</li> <li>Address (complete only different than shown above)</li> <li>Date</li> <li>Time</li> <li>Signature of U.S. Marshal or Deputy</li> </ul> Service Fee         Total Mileage Charges including endeavors)         Forwarding Fee         Total Charges         Advance Deposits         Amount owed to U.S. Marshal* or (Amount of Refund*)	SPACE B acknowledge re number of process Sign only for US	BELOW FOR acceipt for the total ss indicated. SM 285 if more	R USE OF	U.S. M. District of Origin	ARSHAL O District to Serve	DEFENDANT	OT WI	RITE BELOW		LINE
Address (complete only different than shown above)       Date       Time         Service Fee       Total Mileage Charges including <i>endeavors</i> )       Forwarding Fee       Total Charges       Advance Deposits       Amount owed to U.S. Marshal* or (Amount of Refund*)	SPACE B acknowledge re number of process Sign only for US han one USM 28 hereby certify a	BELOW FOR sceipt for the total ss indicated. SM 285 if more 85 is submitted) and return that I	R USE OF Total Process	U.S. MA	ARSHAL O District to Serve No have legal evidence	DEFENDANT	OT WI	RITE BELOW IS Deputy or Clerk as shown in "Remarks"	THIS	Date
Service Fee       Total Mileage Charges including endeavors)       Forwarding Fee       Total Charges       Advance Deposits       Amount owed to U.S. Marshal* or (Amount of Refund*)	SPACE B acknowledge re number of proces Sign only for US han one USM 28 hereby certify a n the individual	BELOW FOR sociept for the total sindicated. SM 285 if more 85 is submitted) and return that I , company, corpora	<b>R USE OF</b> Total Process have personally tion, etc., at the	U.S. MA	ARSHAL O District to Serve No have legal evidend on above on the or	DEFENDANT NLY DO N Signature of Author ce of service,  have he individual, com	OT WI	RITE BELOW IS Deputy or Clerk as shown in "Remarks' ration, etc. shown at th	THIS	Date
Service Fee       Total Mileage Charges       Forwarding Fee       Total Charges       Advance Deposits       Amount owed to U.S. Marshal* or (Amount of Refund*)	SPACE B acknowledge re number of proces Sign only for US han one USM 28 hereby certify a on the individual	BELOW FOR sceipt for the total ss indicated. SM 285 if more 85 is submitted) and return that I , company, corpora tify and return that I	Total Process Total Process have personally tion, etc., at the am unable to lo	U.S. Ma District of Origin No address show	ARSHAL O District to Serve No have legal evidend on above on the or	DEFENDANT NLY DO N Signature of Author ce of service,  have he individual, com	OT WI	A person of suitat then residing in Clerk	THIS ", the proc e address ble age a	Date Date cess described inserted below nd discretion
including <i>endeavors</i> ) (Amount of Refund*)	SPACE B acknowledge re number of proces Sign only for US han one USM 28 hereby certify a n the individual I hereby cer Name and title of	BELOW FOR sceipt for the total ss indicated. SM 285 if more 85 is submitted) and return that I , company, corpora tify and return that I f individual served (	R USE OF Total Process have personally tion, etc., at the am unable to lo <i>if not shown abo</i>	U.S. Ma District of Origin No address show	ARSHAL O District to Serve No have legal evidend on above on the or	DEFENDANT NLY DO N Signature of Author ce of service,  have he individual, com	OT WI	A person of suita then residing in c of abode	THIS ", the pro- e address ble age a lefendant	Date Date cess described inserted below nd discretion
REMARKS:	SPACE B acknowledge re number of proces Sign only for US han one USM 28 hereby certify a n the individual I hereby cer Name and title of	BELOW FOR sceipt for the total ss indicated. SM 285 if more 85 is submitted) and return that I , company, corpora tify and return that I f individual served (	R USE OF Total Process have personally tion, etc., at the am unable to lo <i>if not shown abo</i>	U.S. Ma District of Origin No address show	ARSHAL O District to Serve No have legal evidend on above on the or	DEFENDANT NLY DO N Signature of Author ce of service,  have he individual, com	OT WI	A person of suita then residing in c of abode	THIS ", the proc e address ble age a lefendant Time	Date Date Cess described inserted below nd discretion 's usual place
	SPACE B acknowledge re number of process Sign only for US han one USM 28 hereby certify a on the individual I hereby cer Name and title of Address (completed)	BELOW FOR secipt for the total ss indicated. <i>M 285 if more</i> <i>35 is submitted</i> ) and return that I , company, corpora tify and return that I f individual served ( <i>te only different than</i>	A USE OF Total Process have personally tion, etc., at the am unable to lo if not shown above)	U.S. MA	ARSHAL O District to Serve No have legal evidency vidual, company, o	DEFENDANT	OT WI prized USM e executed pany, corpo ed above (S	A person of suita then residing in c of abode Date Signature of U.S. Marsha	THIS THIS ", the prove address ble age a lefendant Time rshal or I	Date Date Cess described inserted below nd discretion 's usual place

- 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

## INSTRUCTIONS FOR SERVICE OF PROCESS BY U.S. MARSHAL

Please type or print legibly, insuring readability of all copies. DO NOT DETACH ANY COPIES. Submit one complete set of this form (USM-285) and one copy of each writ for each individual, company, corporation, etc., to be served or property to be seized or condemned. The applicable fees for such service(s) (T28, USC Sec. 1921 establishes the fees for service of process by the U.S. Marshal) may be required prior to said service.

For service of any process upon an officer or agent of the United States Government, submit a copy of the writ and a set of Form USM-285 for each officer or agent upon whom service is desired. Submit three (3) additional copies of the writs for service upon the Government of the United States. The U.S. Marshal will serve one (1) upon the U.S. Attorney and will forward two (2) to the Attorney General of the United States. (When the applicable box is checked, completion of the final signature block by the U.S. Marshal or his Deputy always certifies service on the U.S. Attorney and the Attorney General, regardless of whether other defendants on the writ were served.) Failure to provide any of the copies will delay service of the writ.

Complete all entries above the double line. Mark all applicable check boxes and use the "Special Instructions" to advise of any information that will assist the U.S. Marshal in expediting service.

If more than one writ and USM-285 is submitted on a single case, the U.S. Marshal will receipt for all of them on the first USM-285. You will receive for your records the last (No. 5) "Acknowledgment of Receipt" copy for all the USM-285 forms you submit. When the writ is served, you will receive the No. 3 Notice of Service copy. This copy will be identical to the return to the Clerk of the Court.

Upon completion of all services (if the Marshals fees were not requested or tendered in advance or if additional fees are indicated), you will receive a "Billing Statement" (copy 4 of USM-285) from the United States Marshal. (NOTE: Copy 4 should be returned, by you, to the U.S. Marshal, together with your payment of the amount owed.

Additional supplies of the USM-285 may be obtained from the Clerk of the U.S. District Court or U.S. Marshal, without cost.