

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN The Board of County Commissioners of The County of Las Animas
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 200 E. First St., Room 110, Trinidad, CO 81082

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285	1
	Number of parties to be served in this case	13
	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):

**Personal Service**

Signature of Attorney or other Originator requesting service on behalf of Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I \_\_\_\_\_ have personally served, \_\_\_\_\_ have legal evidence of service, \_\_\_\_\_ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, etc., shown at the address indicated below.

\_\_\_\_\_ 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 the defendant's usual place of adobe.		
Address (complete only if different than shown above)	Date of Service	Time	am pm
	Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

PRIOR EDITIONS  
MAY BE USED

**1. CLERK OF THE COURT**

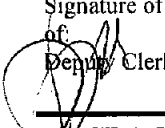
FORM USM-285 (Rev. 12/15/80)

PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Las Animas County Office of the County Attorney
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 200 E. First St., Room 110, Trinidad, CO 81082

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285	1
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**Personal Service**

Signature of Attorney or other Originator requesting service on behalf of  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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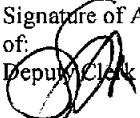
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PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Mary D. Newman, Attorney
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 200 E. First St., Room 110, Trinidad, CO 81082

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285	1
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Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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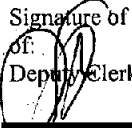
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PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Las Animas County Sheriff Office
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 2309 E. Main St., Trinidad, CO 81082

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285	1
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**Personal Service**

Signature of Attorney or other Originator requesting service on behalf  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
	<input type="checkbox"/> DEFENDANT		

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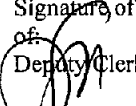
REMARKS:

PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Las Animas County Sheriff, James W. Casias
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 2309 E. Main St., Trinidad, CO 81082

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285	1
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Signature of Attorney or other Originator requesting service on behalf of  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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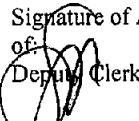
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PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Las Animas County Undersheriff, Derek Navarette
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 2309 E. Main St., Trinidad, CO 81082

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Signature of Attorney or other Originator requesting service on behalf of  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	303-844-3433	08/10/09

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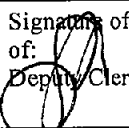
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PLAINTIFF Mark E. Howard		COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al		TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Jesse Manzanaras, Attorney	
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 122 W. First St., Trinidad, CO 81082	

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**Personal Service**

Signature of Attorney or other Originator requesting service on behalf of:  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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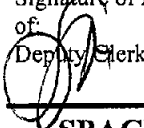
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PLAINTIFF Mark E. Howard		COURT CASE NUMBER 09-cv-00640-PAB-KLM	
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al		TYPE OF PROCESS S/C	
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Fowler, Schimberg, & Flanagan, P.C.		
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 1640 Grant St., Ste 300, Denver, CO 80203		

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Signature of Attorney or other Originator requesting service on behalf of  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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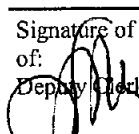
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	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 1640 Grant St. Ste 300, Denver, CO 80203	

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Signature of Attorney or other Originator requesting service on behalf of:  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	303-844-3433	08/10/09

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REMARKS:

U.S. Department of Justice  
United States Marshals Service

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<b>SERVE</b> ➔ <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Cross & Lane, P.C., Jonathan Cross, Attorney
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 400 S. Colorado Blvd, Ste 900, Denver, CO 80246

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Signature of Attorney or other Originator requesting service on behalf of: Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF  <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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REMARKS:

**PROCESS RECEIPT AND RETURN**

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Cross & Lane, P.C., Sean Lane, Attorney
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 400 S. Colorado Blvd, Ste 900, Denver, CO 80246

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285	1
	Number of parties to be served in this case	13
	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):

**Personal Service**

Signature of Attorney or other Originator requesting service on behalf of: Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF  <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I \_\_\_\_\_ have personally served, \_\_\_\_\_ have legal evidence of service, \_\_\_\_\_ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, etc., shown at the address indicated below.

\_\_\_\_\_ 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 the defendant's usual place of adobe.		
Address (complete only if different than shown above)	Date of Service	Time	am pm
	Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Cross & Lane, P.C.
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 400 S. Colorado Blvd, Ste 900, Denver, CO 80246

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285 1
	Number of parties to be served in this case 13
	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):

**Personal Service**

Signature of Attorney or other Originator requesting service on behalf of Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I \_\_\_\_\_ have personally served, \_\_\_\_\_ have legal evidence of service, \_\_\_\_\_ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, etc., shown at the address indicated below.

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Name and title of individual served (if not shown above)	_____ A person of suitable age and discretion then residing in the defendant's usual place of adobe.		
Address (complete only if different than shown above)	Date of Service	Time	am pm
	Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

**PROCESS RECEIPT AND RETURN**

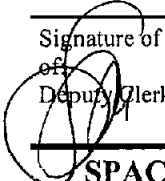
See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF Mark E. Howard	COURT CASE NUMBER 09-cv-00640-PAB-KLM
DEFENDANT The Board of County Commissioners of The County of Las Animas, et al	TYPE OF PROCESS S/C
<b>SERVE</b> → <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN County Technical Services, Inc.
	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 800 Grant St., Ste 400, Denver, CO 80203

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:  Mark E. Howard PO Box 6281 Colorado Springs, CO 80934	Number of process to be served with this Form - 285	1
	Number of parties to be served in this case	13
	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):

**Personal Service**

Signature of Attorney or other Originator requesting service on behalf of  Deputy Clerk	<input checked="" type="checkbox"/> PLAINTIFF  <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 303-844-3433	DATE 08/10/09
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk	Date
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	Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: