Hankins v. Husband et al Doc. 29 Att. 1

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 Terence J. Hankins					COURT CASE NUMBER 11-cv-02224-WJM-CBS						
DEFENDANT US Bureau of Land Managment, Little Snake Resource Area, et al.,					TYPE OF PROCESS S/C						
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN US Bureau of Land Management, Little Snake Resource Area										
AT	ADDRESS (Street or RFD, Apartment No., City State and Zip Code) 458 Emerson Street, Craig, CO 81625										
SEND NOTIC	E OF SERVICE CO	PY TO REC	OUESTER AT N	IAME AND	ADDRI	ESS BELOV	W: 11	Number of proces	ss to be		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS Terence J. Hankins #147323 Sterling Correctional Facility							served with this Form - 285				1
PO Box 6000 Sterling, CO 80751								Number of parties to be served in this case			1
							j	Check for service on U.S.A.			
<u>Addresses</u> , All	STRUCTIONS OR O Telephone Numbers	, and Estimo				IN EXPED	ITING S	ERVICE <u>(Include</u>	e Busin	ess and	<u>Alternate</u>
Signature of Attorney or other Originator requesting service on behalf of: s/ A. Garcia Deputy Clerk							202	TELEPHONE NUMBER DATE 303-844-3433 1/11/12			
SPACI	E BELOW FO	R USE O	F U.S. MAI	RSHAL (ONLY	' - DO N	OT W	RITE BELO) W]	THIS	LINE
total number of (Sign only firs	e receipt for the of process indicated. It USM 285 if more (285 is submitted)	Total Process	District of Origin	District to Serve	Signa	ture of Aut	horized (JSMS Deputy or	Clerk	Date	
	and return that I cribed on the individed ed below.										
I hereb	y certify and return the	hat I am una	ble to locate the	individual, c	ompany	, corporation	on, etc., n	amed above (See	remar	ks belo	w)
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
							Signatu	re of U.S. Marsha	al or D	eputy	
Service Fee	rvice Fee Total Mileage Charges (including endeavors)		Forwarding Fee	Total Cha	Total Charges		Deposits	Amount owed to U.S. Marshal or		Amount of Refund	
REMARKS:				1		•					

PRIOR EDITIONS MAY BE USED

1. CLERK OF THE COURT

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