

AO 440 (Rev. DC - September 2003) Summons in a Civil Action

UNITED STATES DISTRICT COURT  
District of Columbia

NATIONAL SECURITY ARCHIVE

## SUMMONS IN A CIVIL CASE

V.

CENTRAL INTELLIGENCE AGENCY,  
GENERAL MICHAEL V. HAYDEN, in his official capacity as  
Director of the Central Intelligence Agency, and  
SCOTT A. KOCH, in his official capacity as Information and  
Privacy Coordinator of the Central Intelligence Agency

CAS

CASE NUMBER 1:06CV01080

JUDGE: Gladys Kessler

DECK TYPE: FOIA/Privacy Act

DATE STAMP: 06/14/2006

TO: (Name and address of Defendant)

Hon. Alberto R. Gonzales  
Attorney General of the United States  
United States Department of Justice  
950 Pennsylvania Avenue, N.W.  
Washington, D.C. 20530

**YOU ARE HEREBY SUMMONED** and required to serve on PLAINTIFF'S ATTORNEY (name and address)

David S. Mendel, Esq.  
Wilmer Cutler Pickering Hale and Dorr LLP  
1875 Pennsylvania Avenue, N.W.  
Washington, D.C. 20006

an answer to the complaint which is served on you with this summons, within 30 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

**NANCY M. MAYER-WHITTINGTON**


CLERK

*Nancy Mayer-Whittington*  
(By) DEPUTY CLERK

**JUN 14 2006**

DATE

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| RETURN OF SERVICE  |  |   |
|--|--|---|
| Service of the Summons and complaint was made by me <sup>(1)</sup>   | DATE   | June 16, 2006   |
| NAME OF SERVER ( <i>PRINT</i> )  | TITLE  |   |
| Mary Beth Caswell  | Senior Paralegal   |   |
| <i>Check one box below to indicate appropriate method of service</i>   |  |   |
| <input type="checkbox"/>   | Served personally upon the defendant. Place where served: _____  |   |
| <input type="checkbox"/>   | Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.<br>Name of person with whom the summons and complaint were left: _____ |   |
| <input type="checkbox"/>   | Returned unexecuted: _____   |   |
| <input checked="" type="checkbox"/>  | Other (specify): <u>Served by Certified Mail, return receipt requested</u>   |   |
| <b>STATEMENT OF SERVICE FEES</b>   |  |   |
| TRAVEL   | SERVICES   | TOTAL   |
| <b>DECLARATION OF SERVER</b>   |  |   |
| I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct. |  |   |
| Executed on  | <u>June 23, 2006</u>   | <u></u> |
|  | Date   | Signature of Server   |
|  | <u>Wilmer Cutler Pickering Hale and Dorr LLP<br/>1875 Pennsylvania Ave., NW<br/>Washington, D.C. 20006</u>   |   |
|  | Address of Server  |   |

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

| SENDER: COMPLETE THIS SECTION  | COMPLETE THIS SECTION ON DELIVERY  |                     |
|--|--|---------------------|
| <ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | A. Signature<br>X <i>Alberto R. Gonzales</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee   |                     |
| 1. Article Addressed to:<br><br>Honorable Alberto R. Gonzales<br>Attorney General of the United States<br>United States Department of Justice<br>950 Pennsylvania Ave., NW<br>Washington, D.C. 20530   | B. Received by (Printed Name)<br>JUN 16 2006   | C. Date of Delivery |
| 2. Article Number<br>(Transfer from service label)   | D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No  |                     |
| PS Form 3811, February 2004  | 3. Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. |                     |
| Domestic Return Receipt  | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes<br><br>7099 3400 0018 3684 6763   |                     |