

UNITED STATES DISTRICT COURT  
for the  
District of Columbia

R.J. REYNOLDS TOBACCO COMPANY et al.

*Plaintiff*

v.

UNITED STATES FOOD AND DRUG  
ADMINISTRATION et al.

*Defendant*

)  
)  
) Case: 1:11-cv-01482

) Assigned To : Leon, Richard J.

) Assign. Date : 8/16/2011

) Description: Admn Agency Review  
)

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* UNITED STATES FOOD AND DRUG ADMINISTRATION  
10903 New Hampshire Avenue  
Silver Spring, MD 20993

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date:     AUG 16 2011    

CLERK OF COURT

*Sherry R. Hain*  
Signature of Clerk or Deputy Clerk

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Civil Process Clerk, Dist. of Columbia U.S. Attorney's Office  
was received by me on *(date)* 08/16/2011.

I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

I returned the summons unexecuted because \_\_\_\_\_ ; or

Other *(specify)*: I caused copies of the summons and complaint to be sent by certified mail to the Civil  
Process Clerk of the District of Columbia U.S. Attorney's Office. The U.S. Post Office  
return receipt, attached, indicates that the materials were delivered on August 19, 2011.

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 10/14/2011

  
\_\_\_\_\_  
*Server's signature*

Warren Postman, Associate  
*Printed name and title*

51 Louisiana Ave, NW  
Washington, DC 20001

*Server's address*

Additional information regarding attempted service, etc:

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Civil Process Clerk  
 US Attorney's Office  
 555 4th ST NW  
 WASHINGTON DC 20530

4a. Article Number

MAIN AUG 19 2011

4b. Service Type

- Registered  Certified
- Express Mail  Insured
- Return Receipt for Merchandise  COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.