AO 440 (Rev. 02/09) Summons in a Civil Action

| l | JNITED | STATES. | DISTRICT | Court |
|---|--------|---------|----------|-------|
|   |        |         |          |       |

| UNITED STAT   | TES DISTRICT COURT for the         |  |  |  |  |  |  |  |
|---|------------------------------------|--|--|--|--|--|--|--|
| District of   |                                    |  |  |  |  |  |  |  |
| Plaintiff<br>V.<br>Defendant  | _ ) ) (Civil Action No. ) )        |  |  |  |  |  |  |  |
| SUMMONS IN A CIVIL ACTION   |                                    |  |  |  |  |  |  |  |
| To: (Defendant's name and address)  |                                    |  |  |  |  |  |  |  |
|   |                                    |  |  |  |  |  |  |  |
|   |                                    |  |  |  |  |  |  |  |
| A lawsuit has been filed against you.   |                                    |  |  |  |  |  |  |  |
| Within 20 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.  |                                    |  |  |  |  |  |  |  |
|   | CLERK OF COURT                     |  |  |  |  |  |  |  |
| Date:   | 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(1))

|        | This summons for (nam  | e of individual and title, if any)  |                                 |      |          |  |  |
|--------|--|-------------------------------------|---------------------------------|------|----------|--|--|
| was re | ceived by me on (date)   | ·                                   |                                 |      |          |  |  |
|        | ☐ I personally served  | the summons on the individual at    | (place)                         |      |          |  |  |
|        |  |                                     | on (date)                       |      |          |  |  |
|        | ☐ I left the summons a   | at the individual's residence or us | ual 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 summon  |                                     |                                 |      | , who is |  |  |
|        | designated by law to accept service of process on behalf of (name of organization) |                                     |                                 |      |          |  |  |
|        |  |                                     | on (date)                       | ; or |          |  |  |
|        | ☐ I returned the summ  | nons unexecuted because             |                                 |      | ; or     |  |  |
|        | ☐ Other ( <i>specify</i> ):  |                                     |                                 |      |          |  |  |
|        | My fees are \$   | for travel and \$                   | for services, for a total of \$ |      |          |  |  |
|        | I declare under penalty of perjury that this information is true.                  |                                     |                                 |      |          |  |  |
| Date:  |  |                                     |                                 |      |          |  |  |
| Date.  |  |                                     | Server's signature              |      |          |  |  |
|        |  |                                     | Printed name and title          |      |          |  |  |
|        |  |                                     | Server's address                |      |          |  |  |

Additional information regarding attempted service, etc: