

PLAINTIFF KENNETH RAY MITCHELL	COURT CASE NUMBER 3:11-CV-00609-CMC
DEFENDANT KASH THE MAG. OF LIBERTY TAX!	TYPE OF PROCESS INDIVIDUAL "MAG."
SERVE ➔	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN J. KASH, LIBERTY TAX SERVICES MANGER OF OFFICE
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 7120 TWO NOTCH RD. COLA. SC. 29223

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: MR. MITCHELL @ No. #594542 A-S-G-D-C 201 JOHN, MARK, DIAL, RD. COLA. SC. 29209 PH @ -803-718-8004	Number of process to be served with this Form - 285	ONE
	Number of parties to be served in this case	TWO/3
	Check for service on U.S.A.	YES ☑

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):

MR. J. KASH, MANGER OF TWO NOTCH RD. 7120 TWO NOTCH ROAD COLA. SC. 29223, Bussiness open 4P AT 9AM to 5PM MANDAY Through FIRDAY ANSAT. 11AM TILL 3PM unless changed Durning winter season! PHone @ - (803) 865-3334
ALTERNATE IS 9003 TWO NOTCH ROAD COLA. SC. 29223 phone @ (803) 736-7793
(SERVIED J. KASH MAG. LIBERTY TAX SERVICES)

Signature of Attorney or other Originator requesting service on behalf of: Kenneth R. Mitchell KRM.	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 803-718-8004	DATE 10/11/2011
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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. <i>(Sign only first USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
		No. _____	No. _____		

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, corporation, etc., shown at the address inserted 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)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
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 <i>(including endeavors)</i>	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS:

PLAINTIFF KENNETH RAY MITCHELL	COURT CASE NUMBER 3:11-cv-00609-CMC
DEFENDANT JOHN HEWITT "CEO" OF LIBERTY TAX SERVICES	TYPE OF PROCESS INDIVIDUAL (CEO)
SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN JOHN HEWITT "CEO" OF ALL LIBERTY TAX SERVICES.
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) @ 7120 TWO NOTCH RD., COLUMBIA, S.C. 29223

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: KENNETH RAY MITCHELL No. 594542 D-25 A.S.G. D.C. 201 JOHN MARK DIAL DRIVE COLUMBIA, SOUTH CAROLINA, 29209 PH @ → SO CLEARLY 803-713-8004	Number of process to be served with this Form - 285	ONE
	Number of parties to be served in this case	THREE/2
	Check for service on U.S.A.	YES ✓

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):

Fold LIBERTY TAX SERVICES @ 7120 TWO NOTCH ROAD COLUMBIA, S.C., 29223 **Fold**
 HOURS OF Bussiness conduction 9AM to 5PM M-F SAT. 10AM to 1PM Phone #'s
 @ ARE 1-(803)-865-3334 AND @ PH# (803) 736-7793 @ 9003 TWO NOTCH RD. COLA. SC. 29223
 Next to CHURCH CHURCHEN @ TWO NOTCH RD. Near COLA. MALL SEeks!
 ("CEO" JOHN HEWITT), OWNER OF ALL LIBERTY TAX SERVICES (Home VIRGINIA VIRGINIA Beach)
 OR PARTNER IN SOUTH CAROLINA STATE.

Signature of Attorney or other Originator requesting service on behalf of: Kenneth Ray Mitchell xK.R.M.	= <input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 803-735-7979	DATE 10-08-11
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

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	No. _____	No. _____	No. _____		

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, corporation, etc., shown at the address inserted 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)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.		
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

REMARKS: