

U.S. Department of Justice  
United States Marshals Service

U.S. DISTRICT COURT  
DISTRICT OF VERMONT  
**PROCESS RECEIPT AND RETURN**  
FILED

PLAINTIFF Wallace S. Nolan	2011 NOV -9 PM 4:43	COURT CASE NUMBER 2:11-cv-00183-wks
DEFENDANT Aldrich Public Library, et al	CLERK BY <u>HSC</u> DEPUTY CLERK	TYPE OF PROCESS Summons and Complaint

**SERVE AT** NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
 Timothy Bombardier, Barre City Police Department  
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
 15 4th Street, Barre, VT 05641-4476 or 160 Lemroy Court, Richmond, VT 05477-9506

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  Wallace S. Nolen, Pro Se P.O. Box 1025 Montpelier, VT 05601-1025	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	7
	Check for service on U.S.A.	

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

Fold

Signature of Attorney other Originator requesting service on behalf of: <u>Wallace S. Nolan</u>	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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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. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>1</u>	District of Origin No. <u>82</u>	District to Serve No. <u>82</u>	Signature of Authorized USMS Deputy or Clerk <u>C. J. Clarke</u>	Date <u>9/23/11</u>
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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 on the 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) <u>Patthy Ryan</u>	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above) <u>Barre City PD</u>	Date <u>9/23/11</u>
	Time <u>4:30</u> <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <u>Erica Hunt</u>

Service Fee <u>55.00</u>	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges <u>55.-</u>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS:

**PRINT 5 COPIES:**

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

