## UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

JUST FUTURES LAW, CENTER FOR MEDIA JUST MIJENTE SUPPORT COMMITTEE, and IMMIGRANT DEFENSE PROJECT,	TICE,
Plaintiff	
v.	) Civil Action No.
U.S. DEPARTMENT OF HOMELAND SECURITY a DEPARTMENT OF HEALTH AND HUMAN SERVI	)
Defendant	
SUM	MONS IN A CIVIL ACTION
To: (Defendant's name and address)	
U.S. I 200 I	e of the General Counsel DEPARTMENT OF HEALTH AND HUMAN SERVICES independence Ave., S.W. ington, DC 20201
A lawsuit has been filed against you	1.
serve on the plaintiff an answer to the attac	summons on you (not counting the day you received it) you must hed complaint or a motion under Rule 12 of the Federal Rules of ast be served on the plaintiff or plaintiff's attorney, whose name and
Electr 5335	L. Sobel conic Frontier Foundation Wisconsin Avenue, N.W., Suite 640 ington, DC 20015
If you fail to respond, judgment by complaint. You also must file your answer	default may be entered against you for the relief demanded in the or motion with the court.
	ANGELA D. CAESAR, CLERK OF COURT
Date:	Signature of Clerk or Deputy Clerk

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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 (nat	me of individual and title, if any)					
was re	ceived by me on (date)	·					
	☐ I personally served	I the summons on the individual a	t (place)				
			on (date)	; or			
	☐ I left the summons						
	, 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)						
	designated by law to accept service of process on behalf of (name of organization)						
			on (date)	; or			
	☐ I returned the sum		; or				
	☐ Other (specify):						
	My fees are \$	for travel and \$	for services, for a total of \$				
	I dealars under manulty of narium, that this information is true						
	I declare under penalty of perjury that this information is true.						
Date:							
Date.	te:						
	Printed name and title						
			Server's address				

Additional information regarding attempted service, etc: