| Jason Leopold, et al. |) |
|---|--|
| Plaintiff | _ |
| v. |) Civil Action No. |
| National Security Agency, et al. | |
| Defendant | |
| SUMM | IONS IN A CIVIL ACTION |
| Departmer 950 Penns | nch, Attorney General nt of Justice sylvania Ave., NW nn, DC 20530 |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attache | ammons on you (not counting the day you received it) you must ed complaint or a motion under Rule 12 of the Federal Rules of the served on the plaintiff or plaintiff's attorney, whose name and tht |
| If you fail to respond, judgment by de complaint. You also must file your answer or | efault may be entered against you for the relief demanded in the remotion with the court. |
| | ANGELA D. CAESAR, CLERK OF COURT |
| Date: | |
| | Signature of Clerk or Deputy Clerk |

PROOF OF SERVICE

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

| was re | This summons for (nan ceived by me on (date) | ne of individual and title, if any) | | | |
|--------|--|-------------------------------------|---|----------|---|
| | ☐ I personally served | the summons on the individual a | t (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence or us | · — | 1 4 | |
| | | | f suitable age and discretion who resid | | |
| | on (date) | , and mailed a copy to t | he individual's last known address; or | | |
| | | ons on (name of individual) | | , who is | ; |
| | designated by law to a | accept service of process on behal | f of (name of organization) | | |
| | | | on (date) | _ ; or | |
| | ☐ I returned the sumn | nons unexecuted because | | ; or | |
| | ☐ Other (<i>specify</i>): | | | | |
| | 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: | | | | | |
| | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

| Jason Leopold, et al. | |
|--|--|
| Plaintiff | - ′ |
| v. |) Civil Action No. |
| National Security Agency, et al. | |
| Defendant | _ |
| SUMMO | ONS IN A CIVIL ACTION |
| To: (Defendant's name and address) Central Intel Washington | elligence Agency n, DC 20505 |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attached | mmons on you (not counting the day you received it) you must d complaint or a motion under Rule 12 of the Federal Rules of be served on the plaintiff or plaintiff's attorney, whose name and nt |
| If you fail to respond, judgment by defacomplaint. You also must file your answer or | fault may be entered against you for the relief demanded in the motion with the court. |
| | ANGELA D. CAESAR, CLERK OF COURT |
| Date: | |
| | Signature of Clerk or Deputy Clerk |

PROOF OF SERVICE

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

| was ro | This summons for (nanceived by me on (date) | ne of individual and title, if any) | | |
|--------|---|-------------------------------------|--|------------|
| was ie | cerved by me on (date) | · | | |
| | ☐ I personally served | the summons on the individua | l at (place) | |
| | | | on (date) | ; or |
| | ☐ I left the summons | at the individual's residence or | r usual place of abode with (name) | |
| | | , a person | n of suitable age and discretion who resid | les there, |
| | on (date) | , and mailed a copy to | o the individual's last known address; or | |
| | ☐ I served the summo | ons on (name of individual) | | , who is |
| | | | half of (name of organization) | |
| | | | on (date) | ; or |
| | ☐ I returned the summ | mons unexecuted because | | ; or |
| | ☐ Other (specify): | | | |
| | | | | |
| | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0.00 |
| | I declare under penalty | y of perjury that this information | on is true. | |
| | | | | |
| Date: | | | Server's signature | |
| | | | Server's signature | |
| | | | Printed name and title | |
| | | | | |
| | | | Server's address | |

| Jason Leopold, et al. |) |
|---|--|
| Plaintiff |) |
| v. |) Civil Action No. |
| National Security Agency, et al. | |
| Defendant |) |
| SUMMO | ONS IN A CIVIL ACTION |
| To: (Defendant's name and address) Department of 245 Murray L Washington, | _ane, SW |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attached | nmons on you (not counting the day you received it) you must complaint or a motion under Rule 12 of the Federal Rules of the served on the plaintiff or plaintiff's attorney, whose name and |
| If you fail to respond, judgment by defa complaint. You also must file your answer or r | ault may be entered against you for the relief demanded in the motion with the court. |
| | ANGELA D. CAESAR, 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 (l))

| | This summons for (nar | ne of individual and title, if any) | | |
|--------|-------------------------|--------------------------------------|---|------------|
| was re | ceived by me on (date) | <u> </u> | | |
| | ☐ I personally served | the summons on the individual at | E (place) | |
| | | | on (date) | ; or |
| | ☐ I left the summons | at the individual's residence or us | sual place of abode with (name) | |
| | | , a person of | f suitable age and discretion who resid | des there, |
| | on (date) | , and mailed a copy to the | ne individual's last known address; or | |
| | ☐ I served the summo | ons on (name of individual) | | , who is |
| | designated by law to a | accept service of process on behal | f of (name of organization) | |
| | | | on (date) | ; or |
| | ☐ I returned the sumr | mons unexecuted because | | ; or |
| | ☐ Other (specify): | | | |
| | | | | |
| | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0.00 |
| | | | | |
| | I declare under penalty | y of perjury that this information i | s true. | |
| ъ. | | | | |
| Date: | | | Server's signature | |
| | | | | |
| | | | Printed name and title | |
| | | | | |
| | | | | |
| | | | Server's address | |

| Jason Leopold, et al. | |
|---|--|
| Plaintiff | -) |
| v. |) Civil Action No. |
| National Security Agency, et al. |) |
| Defendant | _ |
| SUMM | ONS IN A CIVIL ACTION |
| To: <i>(Defendant's name and address)</i> Department 1400 Penta Washington | t of Defense gon 1, DC 20301-1400 |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attached | mmons on you (not counting the day you received it) you must d complaint or a motion under Rule 12 of the Federal Rules of be served on the plaintiff or plaintiff's attorney, whose name and at |
| If you fail to respond, judgment by def complaint. You also must file your answer or | Fault may be entered against you for the relief demanded in the motion with the court. |
| | ANGELA D. CAESAR, CLERK OF COURT |
| Date: | |
| | Signature of Clerk or Deputy Clerk |

PROOF OF SERVICE

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

| was ro | This summons for (nanceived by me on (date) | ne of individual and title, if any) | | |
|--------|---|-------------------------------------|--|------------|
| was ie | cerved by me on (date) | · | | |
| | ☐ I personally served | the summons on the individua | l at (place) | |
| | | | on (date) | ; or |
| | ☐ I left the summons | at the individual's residence or | r usual place of abode with (name) | |
| | | , a person | n of suitable age and discretion who resid | les there, |
| | on (date) | , and mailed a copy to | o the individual's last known address; or | |
| | ☐ I served the summo | ons on (name of individual) | | , who is |
| | | | half of (name of organization) | |
| | | | on (date) | ; or |
| | ☐ I returned the summ | mons unexecuted because | | ; or |
| | ☐ Other (specify): | | | |
| | | | | |
| | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0.00 |
| | I declare under penalty | y of perjury that this information | on is true. | |
| | | | | |
| Date: | | | Server's signature | |
| | | | Server's signature | |
| | | | Printed name and title | |
| | | | | |
| | | | Server's address | |

| Jason Leopold, et al. |) |
|--|---|
| Plaintiff |) |
| V. |) Civil Action No. |
| National Security Agency, et al. |) |
| Defendant | ·) |
| SUMMO | ONS IN A CIVIL ACTION |
| To: (Defendant's name and address) Department 950 Pennsyl Washington, | Ivania Ave., NW |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attached | nmons on you (not counting the day you received it) you must complaint or a motion under Rule 12 of the Federal Rules of se served on the plaintiff or plaintiff's attorney, whose name and |
| If you fail to respond, judgment by defacomplaint. You also must file your answer or | ault may be entered against you for the relief demanded in the motion with the court. |
| | ANGELA D. CAESAR, 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 (l))

| was re | This summons for (nan ceived by me on (date) | ne of individual and title, if any) | | | |
|--------|--|-------------------------------------|---|----------|---|
| | ☐ I personally served | the summons on the individual a | t (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence or us | · — | 1 4 | |
| | | | f suitable age and discretion who resid | | |
| | on (date) | , and mailed a copy to t | he individual's last known address; or | | |
| | | ons on (name of individual) | | , who is | ; |
| | designated by law to a | accept service of process on behal | f of (name of organization) | | |
| | | | on (date) | _ ; or | |
| | ☐ I returned the sumn | nons unexecuted because | | ; or | |
| | ☐ Other (<i>specify</i>): | | | | |
| | 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: | | | | | |
| | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

| Jason Leopold, et al. |) |
|--|--|
| Plaintiff | _ |
| v. |) Civil Action No. |
| National Security Agency, et al. |) |
| Defendant | |
| SUMM | IONS IN A CIVIL ACTION |
| To: (Defendant's name and address) National S 9800 Sava Fort Meade | ecurity Agency age Rd. e, MD 20755 |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attache | ammons on you (not counting the day you received it) you must ed complaint or a motion under Rule 12 of the Federal Rules of the served on the plaintiff or plaintiff's attorney, whose name and tht |
| If you fail to respond, judgment by de complaint. You also must file your answer o | efault may be entered against you for the relief demanded in the remotion with the court. |
| | ANGELA D. CAESAR, CLERK OF COURT |
| Date: | |
| | Signature of Clerk or Deputy Clerk |

PROOF OF SERVICE

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

| was re | This summons for (nan ceived by me on (date) | ne of individual and title, if any) | | | |
|--------|--|-------------------------------------|---|----------|---|
| | ☐ I personally served | the summons on the individual a | t (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence or us | · — | 1 4 | |
| | | | f suitable age and discretion who resid | | |
| | on (date) | , and mailed a copy to t | he individual's last known address; or | | |
| | | ons on (name of individual) | | , who is | ; |
| | designated by law to a | accept service of process on behal | f of (name of organization) | | |
| | | | on (date) | _ ; or | |
| | ☐ I returned the sumn | nons unexecuted because | | ; or | |
| | ☐ Other (<i>specify</i>): | | | | |
| | 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: | | | | | |
| | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

| Jason Leopold, et al. | |
|---|---|
| Plaintiff | |
| v. |) Civil Action No. |
| National Security Agency, et al. |) |
| Defendant |) |
| SUMMO | ONS IN A CIVIL ACTION |
| To: (Defendant's name and address) Department of 2201 C St., N Washington, | IW |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attached | mons on you (not counting the day you received it) you must complaint or a motion under Rule 12 of the Federal Rules of e served on the plaintiff or plaintiff's attorney, whose name and |
| If you fail to respond, judgment by defar complaint. You also must file your answer or n | ult may be entered against you for the relief demanded in the notion with the court. |
| | ANGELA D. CAESAR, 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 (l))

| was re | This summons for (nan ceived by me on (date) | ne of individual and title, if any) | | | | |
|--|---|--|---|------|---|--|
| | ☐ I personally served | the summons on the individual a | t (place) | | | |
| | | | on (date) | ; or | | |
| ☐ I left the summons at the individual's residence or usual place of abode with (name) | | | | | | |
| | | | f suitable age and discretion who resid | | | |
| | on (date) | he individual's last known address; or | | | | |
| | ☐ I served the summons on (name of individual) | | | | | |
| | designated by law to a | accept service of process on behal | f of (name of organization) | | | |
| | | | on (date) | ; or | | |
| | ☐ I returned the sumn | nons unexecuted because | | ; or | | |
| | ☐ Other (<i>specify</i>): | | | | | |
| | 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: | | | | | | |
| | | | Server's signature | | | |
| | | | Printed name and title | | | |
| | | | Server's address | | | |

| Jason Leopold, et al. |) |
|--|--|
| Plaintiff | - <i>'</i>) |
| v. |) Civil Action No. |
| National Security Agency, et al. |) |
| Defendant | |
| SUMM | IONS IN A CIVIL ACTION |
| 555 4th St. | ey's Office for DC |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attache | mmons on you (not counting the day you received it) you must d complaint or a motion under Rule 12 of the Federal Rules of be served on the plaintiff or plaintiff's attorney, whose name and nt |
| If you fail to respond, judgment by decomplaint. You also must file your answer or | fault may be entered against you for the relief demanded in the r motion with the court. |
| | ANGELA D. CAESAR, 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 (l))

| | This summons for (nan | ne of individual and title, if any) | | | | | |
|---|--|-------------------------------------|---|------------|--|--|--|
| was re | eceived by me on (date) | · | | | | | |
| | ☐ I personally served the summons on the individual at (place) | | | | | | |
| | | | on (date) | ; or | | | |
| | ☐ I left the summons | at the individual's residence or us | sual place of abode with (name) | | | | |
| | | , a person o | f suitable age and discretion who resid | les 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 a | accept service of process on behal | f of (name of organization) | | | | |
| | | | on (date) | ; or | | | |
| | ☐ I returned the summ | mons unexecuted because | | ; or | | | |
| | ☐ Other (specify): | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | 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: | | | Server's signature | | | | |
| | | | | | | | |
| | | | Printed name and title | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | Server's address | | | | |