UNITED STATES DISTRICT COURT

| | for the | | | |
|---|--|--|--|--|
| District of Colorado | | | | |
| Thomas J. Barrack, | Jr.) | | | |
| Plaintiff(s) v. United States Department Defendant(s) |) c of State)))))) | Civil Action No. | | |
| | SUMMONS IN A C | IVIL ACTION | | |
| Maii 180 Den | . Attorney for the District of on Office, Civil Process Clerk 1 California Street, Suite 16 over, CO 80202 | - - | | |
| are the United States or a United State P. 12 (a)(2) or (3) — you must serve the Federal Rules of Civil Procedure whose name and address are: Jaso Josp Brow 410 3 | e of this summons on you (nates agency, or an officer or e on the plaintiff an answer | | | |
| If you fail to respond, judgn You also must file your answer or m | | ed against you for the relief demanded in the complaint. | | |
| | | 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 (nan | ne 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) | ; or | | |
| | ☐ I left the summons | at the individual's residence or | usual place of abode with (name) | | | |
| | | , a person of suitable age and discretion who resides there, | | | | |
| | on (date) | the individual's last known address; or | | | | |
| | ☐ I served the summo | ons on (name of individual) | | , who is | | |
| | designated by law to a | esignated by law to accept service of process on behalf of (name of organization) | | | | |
| | | | on (date) | _ ; or | | |
| | ☐ I returned the sumn | nons 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 informatio | n is true. | | | |
| Date: | | | | | | |
| | | | Server's signature | | | |
| | | | Printed name and title | | | |
| | | | Server's address | | | |

Additional information regarding attempted service, etc: