## UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

	Informed Consent Action Network	(	
	Plaintiff	)	
	v.	)	Civil Action No. 1:24-cv-1030
	National Institutes of Health, et al	. )	
	Defendant	)	
	\$	SUMMONS IN A	CIVIL ACTION
То:	c/c 20	ntional Institutes of He o U.S. Department of l 0 Independence Aver ashington, DC 20201	Health and Human Services
	A lawsuit has been filed agains	st you.	
Civil	on the plaintiff an answer to the	attached complaint in must be served on	ou (not counting the day you received it) you must or a motion under Rule 12 of the Federal Rules of a the plaintiff or plaintiff's attorney, whose name and
comp	If you fail to respond, judgmen laint. You also must file your an	•	entered against you for the relief demanded in the the court.
			ANGELA D. CAESAR, CLERK OF COURT
Date:			
			Signature of Clerk or Deputy Clerk

FOIA Summons (1/13) (Page 2)

Civil Action No. 1:24-cv-1030

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

was ra	This summons for <i>(name)</i>	ne of individual and title, if any)				
was ie		·				
	☐ 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)	, and mailed a copy to the	iled a copy to the individual's last known address; or			
	, who is					
	designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the summ	nons unexecuted because		; or		
	☐ Other (specify):					
		2				
	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			

Additional information regarding attempted service, etc: