)		
)	Civil Action No.	
-TH, et. al.)		
)		
SUMMON	NS IN A C	VIL ACTION	
U.S. Departm Office of the 0 200 Independ	General Cou dence Ave., S	nsel	
ainst you.			
the attached c	omplaint or	a motion under Rule 12 of the Federal Rules of	ıd
en St., 3rd Fl.			
•	•	-	
		ANGELA D. CAESAR, CLERK OF COURT	
		Signature of Clerk or Deputy Clerk	
	U.S. Departm Office of the 0 200 Independ Washington, gainst you. The attached of otion must be pic en St., 3rd Fl.	SUMMONS IN A CI U.S. Department of Health Office of the General Cour 200 Independence Ave., S Washington, DC 20201 gainst you. The of this summons on you the attached complaint or otion must be served on to pic en St., 3rd Fl. 607 The ment by default may be energy answer or motion with the server or	SUMMONS IN A CIVIL ACTION U.S. Department of Health and Human Services Office of the General Counsel 200 Independence Ave., SW, Rm. 713-F Washington, DC 20201 gainst you. The of this summons on you (not counting the day you received it) you must the attached complaint or a motion under Rule 12 of the Federal Rules of otion must be served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, whose name are picture of the served on the plaintiff or plaintiff's attorney, wh

Civil Action No.

PROOF OF SERVICE

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

		ne of individual and title, if any)					
was re	ceived by me on (date)	·					
	☐ I personally served	the summons on the individual at	t (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 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	s true.				
Date:							
			Server's signature				
			Printed name and title				
			Server's address				

	Plaintiff	
	v.) Civil Action No.
NATIONAL IN	NSTITUTES OF HEALTH, et. a	l.)
	Defendant	<u> </u>
	SUM	MONS IN A CIVIL ACTION
To: (Defendo	Office o 900 Ro	I Institutes of Health f the Director ckville Pike da, Maryland 20892
A laws	uit has been filed against you	1.
serve on the pl Civil Procedur	aintiff 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
address are:	Matthew V. Topic Loevy & Loevy 311 N. Aberdeen St., 3r Chicago, IL 60607	d FI.
•	Tail to respond, judgment by ou 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

Civil Action No.

PROOF OF SERVICE

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		me of individual and title, if any)					
was re	ceived by me on (date)	·					
	☐ I personally served	d the summons on the individual at (place)					
			on (date)	; or			
	☐ I left the summons	s at the individual's residence or usual pla	ace of abode with (name)				
	, a person of suitable age and discretion who resides there,						
	on (date)	, and mailed a copy to the indi-	vidual's last known address; or				
	☐ I served the summ	ons on (name of individual)		, who is			
	designated by law to	accept service of process on behalf of (na	me of organization)				
			on (date)	; or			
	☐ I returned the sum	mons unexecuted because		; or			
	☐ Other (specify):			-			
	My fees are \$	for travel and \$	for services, for a total of \$	0.00			
	I declare under penalt	ty of perjury that this information is true.					
Date:			Server's signature				
			Ü				
			Printed name and title				
			Server's address				

NA	Plaintiff v. TIONAL INSTITUTES OF HEALTH, et. al. Defendant))) Civil Action No.) -)
	SUMMO	ONS IN A CIVIL ACTION
To:		ey General /Ivania Avenue, NW n, DC 20530
	A lawsuit has been filed against you.	
Civil	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
comp	If you fail to respond, judgment by defablaint. 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

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was re	ceived by me on (date)	·					
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			on (date)	; or			
	☐ I left the summons	s at the individual's residence or usual pla	ace of abode with (name)				
	, a person of suitable age and discretion who resides there,						
	on (date)	, and mailed a copy to the indi-	vidual's last known address; or				
	☐ I served the summ	ons on (name of individual)		, who is			
	designated by law to	accept service of process on behalf of (na	me of organization)				
			on (date)	; or			
	☐ I returned the sum	mons unexecuted because		; or			
	☐ Other (specify):			-			
	My fees are \$	for travel and \$	for services, for a total of \$	0.00			
	I declare under penalt	ty of perjury that this information is true.					
Date:			Server's signature				
			Ü				
			Printed name and title				
			Server's address				

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)		
)	Civil Action No.	
IEALTH, et. al.)		
t)		
SUMMO	ONS IN A C	IVIL ACTION	
Civil Process United State 601 D Street	es Attorney's 0 t, NW	Office	
d against you.			
r to the attached	complaint o	r a motion under Rule 12 of the Federal Ru	ules of
pevy erdeen St., 3rd Fl.			
			l in the
		ANGELA D. CAESAR, CLERK OF COU	RT
		Signature of Clerk or Deputy Clerk	
7 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Civil Process United State 601 D Street Washington, d against you. Prvice of this sum r to the attached or motion must be T. Topic Devy Perdeen St., 3rd Fl. L 60607	SUMMONS IN A Contress Civil Process Clerk United States Attorney's of 601 D Street, NW Washington, DC 20530 d against you. Tryice of this summons on your to the attached complaint of motion must be served on the complaint of the state of the served on the complaint of the state of the served on the served	SUMMONS IN A CIVIL ACTION SUMMONS IN A CIVIL ACTION Civil Process Clerk United States Attorney's Office 601 D Street, NW Washington, DC 20530 d against you. rvice of this summons on you (not counting the day you received it) yor to the attached complaint or a motion under Rule 12 of the Federal Rule or motion must be served on the plaintiff or plaintiff's attorney, whose received it. Topic pevy perdeen St., 3rd Fl. L 60607 udgment by default may be entered against you for the relief demanded your answer or motion with the court. ANGELA D. CAESAR, CLERK OF COURTICATES.

Civil Action No.

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was re	ceived by me on (date)	·					
	☐ I personally served	the summons on the individual at	t (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 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	s true.				
Date:							
			Server's signature				
			Printed name and title				
			Server's address				