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AMERICAN OVERSIGHT	) ) )
Plaintiff(s)  V.  U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, ADMINISTRATION FOR CHILDREN & FAMILIES, OFFICE OF INSPECTOR GENERAL OF THE U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  Defendant(s)	) Civil Action No. 18-2845 ) ) ) )
SUMMONS IN	A CIVIL ACTION
To: (Defendant's name and address) U.S. DEPARTMENT OF H 200 Independence Avenue Washington, DC 20201	
are the United States or a United States agency, or an offic	
If you fail to respond, judgment by default will be You also must file your answer or motion with the court.	entered against you for the relief demanded in the complaint.
	CLERK OF COURT
Date:	Signature of Clerk or Deputy Clerk

Civil Action No. 18-2845

### PROOF OF SERVICE

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

	This summons for (no	ame of individual and title, if any)	U.S. DEPARTMENT OF HEALTH AND HU	JMAN SERVICES
was rec	ceived by me on (date)		_ •	
	☐ I personally served	d the summons on the individ	dual at (place)	
			on (date)	; or
	☐ I left the summons	s at the individual's residence	e or usual place of abode with (name)	
		, a p	person of suitable age and discretion who res	sides there,
	on (date)	, and mailed a cop	by to the individual's last known address; or	
		ons on (name of individual)		, who is
	designated by law to	accept service of process on	behalf of (name 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 penal	ty of perjury that this inform	ation is true.	
Date:				
			Server's signature	
			Printed name and title	
			Server's address	

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AMERICAN OVERSIGHT	) ) )
Plaintiff(s)	)
v.	Civil Action No. 18-2845
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, ADMINISTRATION FOR CHILDREN & FAMILIES, OFFICE OF INSPECTOR GENERAL OF THE U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES	) ) )
Defendant(s)	ý
SUMMONS II	N A CIVIL ACTION
To: (Defendant's name and address) ADMINISTRATION FOR 300 C Street SW Washington, DC 20201	CHILDREN & FAMILIES
A lawsuit has been filed against you.	
are the United States or a United States agency, or an off	
If you fail to respond, judgment by default will be You also must file your answer or motion with the court.	e entered against you for the relief demanded in the complaint.
	CLERK OF COURT
Date:	Signature of Clerk or Deputy Clerk

Civil Action No. 18-2845

### PROOF OF SERVICE

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

	This summons for (no	ame of individual and title, if any)	ADMINISTRATION FOR CHILDREN & FA	MILIES
was re	ceived by me on (date)			
	☐ I personally serve	d the summons on the individual	dual at (place)	
			on (date)	; or
	☐ I left the summon	s at the individual's residence	e or usual place of abode with (name)	
		, a p	person of suitable age and discretion who res	ides there,
	on (date)	, and mailed a cop	by to the individual's last known address; or	
		nons on (name of individual)		, who is
	designated by law to	accept service of process on	behalf of (name of organization)	
			on (date)	; or
	☐ I returned the sum	amons unexecuted because		; or
	☐ Other (specify):			
	My fees are \$	for travel and \$	for services, for a total of \$	0.00
	I declare under penal	ty of perjury that this inform	ation is true.	
Date:				
			Server's signature	
			Printed name and title	
			Server's address	

District of Columbia				
AMERICAN OVERSIGHT	) ) )			
Plaintiff(s)	) )			
V.	Civil Action No. 18-2845			
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, ADMINISTRATION FOR CHILDREN & FAMILIES, OFFICE OF INSPECTOR GENERAL OF THE U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES	) ) )			
Defendant(s)	, )			
SUMMONS II	N A CIVIL ACTION			
To: (Defendant's name and address) OFFICE OF INSPECTOR HUMAN SERVICES 330 Independence Avenu Washington, DC 20201	R GENERAL OF THE U.S. DEPARTMENT OF HEALTH & ue SW			
A lawsuit has been filed against you.				
are the United States or a United States agency, or an offi P. 12 (a)(2) or (3) — you must serve on the plaintiff an ar	you (not counting the day you received it) — or 60 days if you icer or employee of the United States described in Fed. R. Civ. nswer to the attached complaint or a motion under Rule 12 of tion must be served on the plaintiff or plaintiff's attorney,			
If you fail to respond, judgment by default will be You also must file your answer or motion with the court.	be entered against you for the relief demanded in the complaint.			
	CLERK OF COURT			
Date:				
	Signature of Clerk or Deputy Clerk			

Civil Action No. 18-2845

### PROOF OF SERVICE

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

		ume of individual and title, if any)	OFFICE OF THE INSPECTOR GENERAL OF THE U.S. DEPARTMENT OF	HEALTH AND HUMAN SERVICES	
was re	ceived by me on (date)		·		
	☐ I personally served	d the summons on the individ	dual at (place)		
			on (date)	; or	
	☐ I left the summons	s at the individual's residence	e or usual place of abode with (name)		
		, a p	person of suitable age and discretion who res	sides there,	
	on (date)	, and mailed a cop	by to the individual's last known address; or		
		ons on (name of individual)	1.1.16.6	, who is	
	designated by law to	accept service of process on	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 penal	ty of perjury that this inform	ation is true.		
Date:					
			Server's signature		
			Printed name and title		
			Server's address		

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District	or Columbia
AMERICAN OVERSIGHT	) ) )
Plaintiff(s)  V.  U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, ADMINISTRATION FOR CHILDREN & FAMILIES, OFFICE OF INSPECTOR GENERAL OF THE U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  Defendant(s)	) Civil Action No. 18-2845 ) ) ) ) )
SUMMONS IN	N A CIVIL ACTION
To: (Defendant's name and address) Civil Process Clerk UNITED STATES ATTOR 555 4th Street, N.W. Washington, DC 20530	RNEY'S OFFICE
A lawsuit has been filed against you.	
are the United States or a United States agency, or an office	
If you fail to respond, judgment by default will be You also must file your answer or motion with the court.	e entered against you for the relief demanded in the complaint.
	CLERK OF COURT
Date:	
Dutc	Signature of Clerk or Deputy Clerk

Civil Action No. 18-2845

### PROOF OF SERVICE

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

	This summons for (no	ame of individual and title, if any)	Civil Process Clerk		
was rec	ceived by me on (date)		· -		
	☐ I personally serve	ed the summons on the individ	dual at (place)		
			on (date)	; or	
	☐ I left the summon	s at the individual's residence	e or usual place of abode with (name)		
		, a p	person of suitable age and discretion who res	sides there,	
	on (date)	, and mailed a cop	by to the individual's last known address; or		
		nons on (name of individual)		, who is	
	designated by law to	accept service of process on	behalf of (name of organization)		
			on (date)	; or	
	☐ I returned the sum	nmons unexecuted because		; or	
	☐ Other (specify):				
	My fees are \$	for travel and \$	for services, for a total of \$	0.00	
	I declare under penal	Ity of perjury that this inform	ation is true.		
Date:					
			Server's signature		
			Printed name and title		
			Server's address		

# United States District Court

District	of	Col	lum	bia

AMERICAN OVERSIGHT )					
Plaintiff(s)  V.  U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, ADMINISTRATION FOR CHILDREN & FAMILIES, OFFICE OF INSPECTOR GENERAL OF THE U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES  Defendant(s)	Civil Action No. 18-2845				
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address) Attorney General of the United States UNITED STATES DEPARTMENT OF JUSTICE 950 Pennsylvania Avenue, N.W. Washington, DC 20530					
A lawsuit has been filed against you.					
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:  Joseph F. Yenouskas  GOODWIN PROCTER LLP  901 New York Ave N.W.  Washington, DC 20001					
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.					
	CLERK OF COURT				
Date:	Signature of Clerk or Deputy Clerk				

Civil Action No. 18-2845

### PROOF OF SERVICE

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

was rec	This summons for (name ceived by me on (date)	ne of individual and title, if any) At	torney General of the United States			
	☐ I personally served	the summons on the individual				
			on (date)	; or		
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	on (date), 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) , who					
	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):					
	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			