| Reporters Committee for Freedom of the Press | |
|--|---|
| Plaintiff | -) |
| v. |) Civil Action No. |
| United States Department of Justice, et al. |) |
| Defendant | - <i>'</i> ,) |
| SUMM | ONS IN A CIVIL ACTION |
| 950 Penns | res Attorney General ylvania Ave., N.W. n, D.C. 20530 |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attached | |
| If you fail to respond, judgment by def complaint. 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 (1))

| | This summons for (nat | me of individual and title, if any) | | | |
|--------|------------------------|--------------------------------------|---|------------|----------|
| was re | ceived by me on (date) | · | | | |
| | ☐ I personally served | I the summons on the individual a | t (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence or us | | | |
| | | , a person o | f suitable age and discretion who resid | des there, | |
| | on (date) | , and mailed a copy to the | ne individual's last known address; or | | |
| | | ons on (name of individual) | | | , who is |
| | designated by law to | accept service of process on behal | f 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 \$ | |) |
| | I daalara undar nanalt | y of perjury that this information | is true | | |
| | i deciare under penan | y of perjury that this information i | is true. | | |
| Date: | | | | | |
| Date. | | · | Server's signature | | |
| | | | | | |
| | | | Printed name and title | | |
| | | | | | |
| | | | | | |
| | | | Server's address | | |

| Reporters Committee for Freedom of the Press |) |
|--|--|
| Plaintiff | |
| v. |) Civil Action No. |
| United States Department of Justice, et al. |) |
| Defendant | |
| SUMM | ONS IN A CIVIL ACTION |
| 555 4th St | ney's Office for the District of Columbia |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attache | |
| 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 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 (1))

| was re | This summons for <i>(nan ceived by me on (date)</i> | ne of individual and title, if any) | | | |
|--------|---|---|--|-----------|------------|
| | ☐ I personally served | the summons on the individual a | at (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence or u | sual place of abode with (name) of suitable age and discretion who resid | les there | 2 |
| | on (date) | | the individual's last known address; or | | ~, |
| | | ons on (name of individual) accept service of process on beha | If of (name of organization) | | _ , who is |
| | | ecopt service or process on com | 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 |
| | I declare under penalty | of perjury that this information | is true. | | |
| Date: | | | | | |
| | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

| Reporters Committee for Freedom of the Press |) |
|--|--|
| Plaintiff | -) |
| v. |) Civil Action No. |
| United States Department of Justice, et al. |) |
| Defendant | - ',) |
| SUMM | ONS IN A CIVIL ACTION |
| 950 Penns | tes Department of Justice ylvania Ave., N.W. n, D.C. 20530 |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attached | |
| If you fail to respond, judgment by def complaint. You also must file your answer or | |
| | 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 (1))

| was re | This summons for <i>(nan ceived by me on (date)</i> | ne of individual and title, if any) | | | |
|--------|---|-------------------------------------|---|-----------|------------|
| was re | • | the summons on the individu | al at <i>(place)</i> | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence of | or usual place of abode with (name) | | |
| | | , a perso | on of suitable age and discretion who resid | les there | <i>)</i> , |
| | 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 bo | ehalf 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 |
| | I declare under penalty | y of perjury that this informati | on is true. | | |
| Date: | | | | | |
| Dute. | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

| Reporters Committee for Freedom of | of the Press | |
|---|--|--|
| Plaintiff |) | |
| v. |) | Civil Action No. |
| United States Department of Just | ice, et al. | |
| Defendant |) | |
| | SUMMONS IN | N A CIVIL ACTION |
| To: (Defendant's name and address, | Executive Office for | r United States Attorneys Ave., N.W., Rm. 2242 20530-0001 |
| A lawsuit has been filed ag | gainst you. | |
| serve on the plaintiff an answer to Civil Procedure. The answer or m address are: | the attached complete to the attached complete to the serve and mittee for Freedom of N.W., # 1020 | on you (not counting the day you received it) you must aint or a motion under Rule 12 of the Federal Rules of ed on the plaintiff or plaintiff's attorney, whose name and of the Press |
| If you fail to respond, judg complaint. You also must file you | • | y be entered against you for the relief demanded in the 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 (1))

| | This summons for (nat | me of individual and title, if any) | | | |
|--------|------------------------|--------------------------------------|---|------------|----------|
| was re | ceived by me on (date) | · | | | |
| | ☐ I personally served | I the summons on the individual a | t (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence or us | | | |
| | | , a person o | f suitable age and discretion who resid | des there, | |
| | on (date) | , and mailed a copy to the | ne individual's last known address; or | | |
| | | ons on (name of individual) | | | , who is |
| | designated by law to | accept service of process on behal | f 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 \$ | |) |
| | I daalara undar nanalt | y of perjury that this information | is true | | |
| | i deciare under penan | y of perjury that this information i | is true. | | |
| Date: | | | | | |
| Date. | | · | Server's signature | | |
| | | | | | |
| | | | Printed name and title | | |
| | | | | | |
| | | | | | |
| | | | Server's address | | |

| Reporters Committee for Freedom of the Press | S) |
|---|--|
| Plaintiff | |
| v. |) Civil Action No. |
| United States Department of Justice, et al. |) |
| Defendant | |
| SUMI | MONS IN A CIVIL ACTION |
| 935 Penr | Bureau of Investigation nsylvania Ave., N.W. ton, D.C. 20535 |
| A lawsuit has been filed against you. | |
| serve on the plaintiff an answer to the attach | |
| If you fail to respond, judgment by d complaint. You also must file your answer | |
| | 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 (1))

| was re | This summons for <i>(nan ceived by me on (date)</i> | ne of individual and title, if any) | | | |
|--------|---|-------------------------------------|---|-----------|------------|
| was re | • | the summons on the individu | al at <i>(place)</i> | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons | at the individual's residence of | or usual place of abode with (name) | | |
| | | , a perso | on of suitable age and discretion who resid | les there | <i>)</i> , |
| | 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 bo | ehalf 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 |
| | I declare under penalty | y of perjury that this informati | on is true. | | |
| Date: | | | | | |
| Dute. | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |