AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

District of Columbia

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ORRICK, HERRINGTON & SUTCLIFFE LLP 1152 15th Street NW Washington, DC 20005

Plaintiff(s)

v. U.S. CUSTOMS & BORDER PROTECTION 1300 Pennsylvania Ave. NW, Washington, DC 20229 and U.S. IMMIGRATION & CUSTOMS ENFORCEMENT 500 12th Street SW, Washington, DC 20536

Defendant(s)

)

Civil Action No.

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) U.S. CUSTOMS AND BORDER PROTECTION 1300 Pennsylvania Avenue NW Washington, DC 20229

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: ROBERT STERN (D C. Bar No. 478742)

ROBERT STERN (D.C. Bar No. 478742) rstern@orrick.com ORRICK, HERRINGTON & SUTCLIFFE LLP Columbia Center 1152 15th Street NW Washington, D.C. 20005-1706 Telephone: 202-339-8400

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

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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 (name of individual and title, if any)				
was re	ceived by me on (date)				
	□ I personally served	dividual at (place)			
			on (date)	; or	
	□ I left the summons at the individual's residence or usual place of abode with (<i>name</i>)				
	, a person of suitable age and discretion who resides there,				
	on (date), and mailed a copy to the individual's last known address; or				
	\Box I served the summ	ons on (name of individual)		, who is	
	designated by law to accept service of process on behalf of (name of organization)				
			on (date)	; or	
	\Box I returned the sum	mons unexecuted becaus	se	; or	
	Other (<i>specify</i>):				
	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:					
Date.		-	Server's signature		
			Printed name and title		

Server's address

Additional information regarding attempted service, etc: