UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

| Louisiana Capital Assistance Center | | | | | |
|-------------------------------------|---|---|--|--|--|
| | Plaintiff |) | | | |
| v. | | |) Civil Action No. | | |
| Federal Bureau of Prisons | |) | | | |
| | Defendant |) | | | |
| | | SUMMONS IN | A CIVIL ACTION | | |
| To: (Defendant | t's name and address | Jessie K. Liu Attn: Civil Process C | ey for the District of Columbia ey's Office | | |
| A lawsui | t has been filed ag | gainst you. | | | |
| serve on the plain | ntiff an answer to The answer or m Christine Lehn | the attached complant to the attached complant to the served mann that Assistance Center Street | n you (not counting the day you received it) you must int or a motion under Rule 12 of the Federal Rules of d on the plaintiff or plaintiff's attorney, whose name and | | |
| • | | ment by default may ir answer or motion v | 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 | | |

FOIA Summons (1/13) (Page 2)

Civil Action No.

PROOF OF SERVICE

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

| was re | This summons for (nan ceived by me on (date) | ne of individual and title, if any) | | | | | | |
|--------|--|--|--|------|----------|--|--|--|
| | ☐ I personally served | the summons on the individual a | nt (place) | | | | | |
| | | | on (date) | ; or | | | | |
| | ☐ I left the summons | 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 t | mailed a copy to the individual's last known address; or | | | | | |
| | | ons on (name of individual) | | : | , who is | | | |
| | designated by law to a | accept service of process on beha | lf of (name of organization) | | | | | |
| | | | on (date) | ; or | | | | |
| | ☐ I returned the summ | nons unexecuted because | | | ; or | | | |
| | ☐ Other (<i>specify</i>): | | | | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0.0 | 0 . | | | |
| | 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: