Alex Shteynshlyuger, M.D.	
Plaintiff)
v. Centers for Medicare & Medicaid Services, et. al.) Civil Action No.
Defendant)
SUMMO	ONS IN A CIVIL ACTION
To: (Defendant's name and address) Centers for I 7500 Securi Baltimore, M	
A lawsuit has been filed against you.	
serve on the plaintiff an answer to the attached	amons on you (not counting the day you received it) you must complaint or a motion under Rule 12 of the Federal Rules of e served on the plaintiff or plaintiff's attorney, whose name and
If you fail to respond, judgment by defa complaint. You also must file your answer or r	ult may be entered against you for the relief demanded in the motion with the court.
	ANGELA D. CAESAR, CLERK OF COURT
Date:	Sign atoms of Cloub on Donothy Cloub
	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 (nan	me of individual and title, if any)				
was re	ceived by me on (date)	·				
	☐ I personally served	I the summons on the individual at	(place)			
	on (date) ; or					
	☐ I left the summons	at the individual's residence or us				
		, a person of	suitable age and discretion who resid	des there,		
	on (date)	, and mailed a copy to th	e individual's last known address; or			
	☐ I served the summe	ons on (name of individual)		, who is		
	designated by law to	accept service of process on behalf	f of (name of organization)			
			on (date)	; or		
	☐ I returned the summons unexecuted because					
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I dealers under nonalt	y of perjury that this information is	a truo			
	i deciare under penan	y or perjury that this information is	s true.			
Date:						
Date.		-	Server's signature	-		
			Printed name and title			
			Server's address			

Alex Shteynshlyuger, M.D.)
Plaintiff)
v.) Civil Action No.
Centers for Medicare & Medicaid Services, et. al.)
Defendant)
SUMMO	NS IN A CIVIL ACTION
	nent of Health and Human Services dence Avenue, SW DC 20201
A lawsuit has been filed against you.	
serve on the plaintiff an answer to the attached c	mons on you (not counting the day you received it) you must complaint or a motion under Rule 12 of the Federal Rules of served on the plaintiff or plaintiff's attorney, whose name and
If you fail to respond, judgment by defau complaint. You also must file your answer or m	alt may be entered against you for the relief demanded in the notion 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>(nam 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	
	on (date)		the individual's last known address; or		
	☐ I served the summo designated by law to a	ons on (name of individual) accept service of process on beha	If of (name of organization)	, ,	who is
	8	, , , , , , , , , , , , , , , , , , ,	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 information	is true.		
Date:					
			Server's signature		
			Printed name and title		
			Server's address		

Alex Shteynshlyuger, M.D.)
Plaintiff)
v.) Civil Action No.
Centers for Medicare & Medicaid Services, et. al.)
Defendant)
SUMMO	NS IN A CIVIL ACTION
To: (Defendant's name and address) U.S. Attorney 950 Pennsylv Washington,	vania Avenue, NW
A lawsuit has been filed against you.	
serve on the plaintiff an answer to the attached of	mons on you (not counting the day you received it) you must complaint or a motion under Rule 12 of the Federal Rules of e served on the plaintiff or plaintiff's attorney, whose name and
If you fail to respond, judgment by defau complaint. You also must file your answer or m	alt may be entered against you for the relief demanded in the notion with the court.
	ANGELA D. CAESAR, CLERK OF COURT
Date:	
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 (no	ame of individual and title, if any)		
was re	ceived by me on (date)			
	☐ I personally serve	d the summons on the individual at (place)		
			on (date)	; or
	☐ I left the summon	s at the individual's residence or usual pla	ace of abode with (name)	
		, a person of suital	ble age and discretion who resid	les there,
	on (date)	, and mailed a copy to the indi	vidual's last known address; or	
	☐ I served the summ	nons on (name of individual)		, who is
	designated by law to	accept service of process on behalf of (no		
			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	ty of perjury that this information is true.		
Date:			Server's signature	
			20.10.22.8	
			Printed name and title	
			Server's address	

Alex Shteynshlyuger, M.D.

)	
	Plaintiff	_)	
v.)	Civil Action No.
Centers for Medicar	e & Medicaid Servi	ices, et. al.)	
	Defendant)	
		SUMMON	IS IN A CIV	VIL ACTION
To: (Defendant's	\ !	Civil Process (United States 555 Fourth Str Washington, D	Attorney's Off reet, NW	fice
A lawsuit h	as been filed agai	inst you.		
serve on the plainti Civil Procedure. T	iff an answer to th	ne attached co	omplaint or a	(not counting the day you received it) you must a motion under Rule 12 of the Federal Rules of e plaintiff or plaintiff's attorney, whose name and
address are:	Matthew V. Topio Loevy & Loevy 311 N. Aberdeen Chicago, IL 6060	St., 3rd Fl.		
If you fail to complaint. You als		•	•	ered against you for the relief demanded in the e court.
			A	INGELA D. CAESAR, CLERK OF COURT
Date:				
			_	Signature of Clerk or Deputy Clerk

Civil Action No.

PROOF OF SERVICE

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was ro	This summons for <i>(nan ceived by me on (date)</i>	ne of individual and title, if any)					
was ie	•	·					
	☐ I personally served the summons on the individual at (place)						
			on (date)	; or			
	☐ I left the summons at the individual's residence or usual place of abode with (name)						
		, a person of	suitable age and discretion who resid	les there,			
	on (date)	, and mailed a copy to th	e 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 behalf					
			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 \$	0.00			
	I declare under penalty of perjury that this information is true.						
Date:			Server's signature				
			Printed name and title				
			Server's address				