Department of Justice States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PA T	COURT CASE NUMBER		
RA ₁ T	2:13-CV-157-FTM-99-DNF		
DEFENDANT NATIONAL ASSOCIATION OF PROFESSIONAL PROCESS SERVERS	TYPE OF PROCESS SUMMONS ORIGINAL COMPLAINT		
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCR.			
SERVE National Association of Professional Process Servers, INC	TUST HE THE TERM HE THE THE TERM HE THE TH		
AT ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	ERR 21		
26 Ridge Road Smithtown, NY 11787	S. F. ORO		
	Number of process to be served with this Form 28		
	Number of parties to be served in this case 15		
33936	Check for service on U.S.A.		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE All Telephone Numbers, and Estimated Times Available for Service):	CE (Include Business and Alternate Addresses;		
Upon officer/President NORMAN LARRY YELLON service includes summons, com			
() () I I	93007007 DATE 3/12/13		
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY DO NOT	WRITE BELOW THIS LINE		
number of process indicated. Origin Serve	USMS Deputy or Clerk Date		
than one USM 285 is submitted) No. 10 No	4-24-1.		
I hereby certify and return that I have personally served . have legal evidence of service, have execon the individual, company, corporation, etc., at the address shown above on the on the individual, company.	cuted as shown in "Remarks", the process described corporation, etc. shown at the address inserted below.		
I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named about	we (See remarks below)		
Name and title of individual as red (if not shown above)	A person of suitable age and discretion then residing in defendant's usual place of abode		
Address (complete only different than shown above)	Date Time		
Personally served on Norman Yellon e About Address	6/20/17 930 Dpm		
	Signature of U.S. Marshal or Deputy # 3(05)		
including endeavors)	Amount owed to U.S. Marshal* or Amount of Refund*)		
000 1			
220.00 54.00 \$8.00 274.00	\$0.00		

- PRINT 5 COPIES: 1. CLERK OF THE COURT 2. USMS RECORD

 - 3. NOTICE OF SERVICE
 - 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 5. ACKNOWLEDGMENT OF RECEIPT

ev.	12/09)	Summons in a Civil Action (Page 2)
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ion No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

vas re	This summons for (no ceived by me on (date)	ame of individual and title, if any)	Notional Associa	hai of Profe	mineral bourn	<u>Se</u> n	
		d the summons on the individu			; or		
	•	s at the individual's residence o	r usual place of abode wit	h (name)	doe those	_	
	, a person of suitable age and discretion who resides there, on (date) , and mailed a copy to the individual's last known address; or						
		nons on (name of individual) accept service of process on be	chalf of (name of organization		, who is	;	
			on (date)		_ ; or	_	
	☐ I returned the sum	mons unexecuted because			; or		
	Other (specify):					•	
	My fees are \$	for travel and \$	for services, f	or a total of \$	0.00	-·	
	I declare under penal	ty of perjury that this informati	on is true.				
oate: _	6/20/13		J M Server's sig				
			Robert Count	u Dusm	\$360s		
			310 Federal Place Server's a		Ishp NY		

Additional information regarding attempted service, etc: