

Civil Action No. 18-cv-2399-KBJ

**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 received by me on *(date)* \_\_\_\_\_.

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 resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_; or

I returned the summons unexecuted because \_\_\_\_\_; or

Other *(specify)*: I sent a copy of the summons and complaint by certified mail to: the Federal Bureau of Prisons, the civil-process clerk for the U.S. Attorney's Office for the District of Columbia, and the Attorney General of the United States.

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: 10/31/2018

*Megan Graham*

*Server's signature*

Megan Graham, Clinical Teaching Fellow

*Printed name and title*

Samuelson Law, Technology & Public Policy Clinic  
UC Berkeley School of Law, 353 Boalt Hall  
Berkeley, CA 94720

*Server's address*

Additional information regarding attempted service, etc:

Print

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SATHER GATE  
2515 12<sup>th</sup> DURANT AVE  
BERKELEY  
CA  
94704-9991  
0506420061

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Product Description	Sale Qty	Final Price
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First-Class Mail Large Envelope (Domestic) (WASHINGTON, DC 20530) (Weight:0 Lb 5.10 Oz) (Estimated Delivery Date) (Friday 10/26/2018)	1	\$2.05
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Certified (©©USPS Certified Mail #) (70163560000053066655)	1	\$3.45
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First-Class Mail Large Envelope (Domestic) (WASHINGTON, DC 20530) (Weight:0 Lb 5.40 Oz) (Estimated Delivery Date) (Friday 10/26/2018)	1	\$2.05
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Certified (©©USPS Certified Mail #) (70163560000053066709)	1	\$3.45
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First-Class Mail Large Envelope (Domestic) (WASHINGTON, DC 20534) (Weight:0 Lb 5.10 Oz) (Estimated Delivery Date) (Friday 10/26/2018)	1	\$2.05
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Certified (©©USPS Certified Mail #) (70163560000053066693)	1	\$3.45
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Certified (©©USPS Certified Mail #) (70163560000053066679)	1	\$3.45
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<b>Total</b>		<b>\$22.00</b>
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Credit Card Remitd (Card Name:AMEX) (Account #:XXXXXXXXXX1006) (Approval #:864303) (Transaction #:559) (AID:A000000025010801 Chip) (AL:AMERICAN EXPRESS) (PIN:Not Required)		\$22.00
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Certified Mail Fee	\$3.45
Extra Services & Fees (check box, add fee as appropriate)	\$0.00
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$2.05
<b>Total Postage and Fees</b>	<b>\$5.50</b>

Sent To  
**Federal Bureau of Prisons**  
Street and Apt. No., or PO Box No.  
**320 First Street NW**  
City, State, ZIP+4®  
**WASHINGTON, DC 20534**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Postage	\$2.05
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**WASHINGTON, DC 20530-0001**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$2.05

Total Postage and Fees \$5.50

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WASHINGTON, DC 20530

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<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

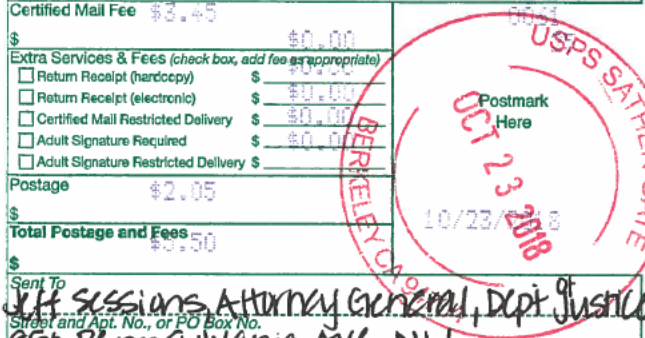
Postage \$2.05

Total Postage and Fees \$5.50

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JH SESSIONS, ATTORNEY GENERAL, DEPT JUSTICE  
950 PENNSYLVANIA AVE. NW  
WASHINGTON, DC 20530-0001

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(Approval #:864303)  
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(AID:A000000025010801)  
Chip  
(AL:AMERICAN EXPRESS)  
(PIN:Not Required)

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